



Tamilnad Mercantile Bank Ltd.

Customer Oriented & Committed to Excellence

ACCOUNT OPENING FORM

For Resident Indian

(Individuals / Sole proprietorship firms)

- SAVINGS BANK CURRENT
 OD CC ANYWHERE
 TERM DEPOSITS

If existing account holder

Customer ID

Account No.

Name of the Customer : _____ Scheme of Account

FOR OFFICE USE ONLY

Customer ID 1	New Account No.
Customer ID 2	Customer ID 3

DOCUMENTATION CHECK LIST

INDIVIDUAL / SOLE PROPRIETORSHIPS :

PROOF OF IDENTITY AND ADDRESS : Please produce any one of the documents from List A and List B.

LIST A : IDENTITY PROOF

- Passport
- PAN Card
- Voter's Identity Card
- Driving Licence with Photograph
- Identity Card/ confirmation from employer
(Subject to the bank's satisfaction)
- Letter from a recognized public authority or public servant verifying the identity and residence of the customer to the satisfaction of bank
- Identity Card / Document with applicant's photo, issued by
 - Central / State Government and its Department
 - Statutory / Regulatory authorities
 - Public Sector undertakings
 - Colleges affiliated to Universities (this can be treated as valid only till the time the applicant is a student)
 - Professional bodies such as ICAI, ICWAI, ICSI & Bar Council etc to their members.
 - Credit Cards / Debit Cards issued by banks with photo

LIST B : ADDRESS PROOF

- Passport
 - Voter's Identity Card
 - Driving Licence
 - Telephone bill(latest)
 - Bank account statement
 - Letter from any recognized public authority
 - Electricity bill (latest)
 - Ration Card
 - Letter from employer (subject to satisfaction of the bank)
 - Other Bank pass books
 - Self declaration by High Court & Supreme Court Judges giving the new address in respect of their own accounts
 - Identity card/ Document with applicant's photo, issued by
 - Central / State Government and its Department
 - Statutory/ Regulatory authorities
 - Public Sector undertakings
 - Scheduled Commercial Bank
 - Colleges affiliated to Universities (this can be treated as valid only till the time the applicant is a student)
 - Professional bodies such as ICAI, ICWAI, ICSI & Bar Council etc to their members.
- For rural branches in the absence of any of the above documents, certificate from the local body/NGO/MFI will suffice for establishing identity and address of the applicant.

SOLE PROPRIETORSHIP FIRMS :

Any one of the following is required :

- Shop and Establishment certificate / Municipal licence
- Sales and Income Tax Returns
- Registration Certificate of Sales Tax
- Chartered Accountant Certificate
- Existing Bank Statement from the current Banker, for a minimum period of 6 months.

SENIOR CITIZENS FOR PROOF OF DATE OF BIRTH

Any one of the following is required :

- | | |
|-------------------------------|-----------------------------------|
| 1. Government ID Card | 6. Passport |
| 2. School leaving certificate | 7. Driving Licence |
| 3. Voter's ID Card | 8. Ration Card |
| 4. LIC / Insurance Policy | 9. Pension Card (Issued by govt.) |
| 5. Birth Certificate | |

Note :

- Original and a photo copies of the proof of identity and address are to be produced. Original will be returned after verification.
- Proof of PAN / GIR No or Form 60/61 is mandatory for cash deposits above Rs.50000/-.
- FOR MINOR OPERATED ACCOUNTS, Copy of the Birth Certificate should be produced.
- The Manager / Sub Manager / Asst. Manager shall visit and verify the current address if it is different from the document produced.
- All Signatures are to be affixed in the presence of bank's official.

DATE :

To

The Branch Manager, Tamilnad Mercantile Bank Ltd.,

Please open my / our / joint / sole proprietorship account at your _____ Branch

ACCOUNT OPTIONS
 Current TMB Silver TMB Gold TMB Pearl TMB Platinum TMB Diamond
 Savings TMB SB Premium TMB Janatha TMB VISA OD CC _____
TERM DEPOSITS
 FD KIDS RD TMB TSD Malligai TMB TSD Mullai NMD TMB Double
 Pearl Deposit MKD Cash Certificate _____ _____
Deposit Period Deposit Amount Rs. In case of RD. Rs. _____ pm _____ months**PERSONAL DETAILS**

APPLICANT	TITLE	(In the order of First Name, Middle name and Surname)	DATE OF BIRTH (DD/MM/YYYY)	OCCUPATION	
FIRST Mr./Ms./Mrs.					
SECOND Mr./Ms./Mrs.					
THIRD MR./MS./Mrs.					
	SEX M / F	FATHER'S / HUSBAND'S NAME	MARITAL STATUS	RELATIONSHIP WITH THE FIRST APPLICANT	PAN/GIR NO (IF NO PLEASE FILL FORM 60)
FIRST					
SECOND					
THIRD					

MINOR ACCOUNT

I hereby declare that I am the natural guardian / guardian appointed by the court vide order no. _____ dated _____ (copy enclosed) of Master / Miss _____. I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I shall fully indemnify the bank against the claim of the above minor for any withdrawal / transaction made by me in his / her account.

Guardian Type : Natural Guardian (Father / Mother / _____) Guardian appointed by Court

Name and Address of the Guardian

Signature of the Guardian

NAME OF THE SOLE PROPRIETORSHIP CONCERN :-

		PINCODE
PHONE NO (OFF)	PHONE NO (RES)	MOBILE NO.
EMAIL ID		

PERMANENT ADDRESS (IF DIFFERENT FROM ABOVE)

		PINCODE
PHONE NO (OFF)	PHONE NO (RES)	MOBILE NO.
EMAIL ID		

ACCOUNTS WITH OTHER BANKS / OTHER BRANCHES OF TMB :

BANK	BRANCH / ADDRESS	ACCOUNT TYPE	ACCOUNT NO.

Current Account : I / We declare that I / we do not enjoy credit facilities with other bank/s.

I / we enjoy credit facility / have current account with other banks, details of which are furnished below :

(If credit facility is enjoyed with other bank, NOC should be obtained and produced for opening the account)

Name of the Bank	Account No.	Facility	Amount

Sole Proprietorship account : _____
From Mr. / Mrs. _____

Residential Address _____

_____ PHONE No. _____

I hereby inform you that until written notice from me to the contrary, to regard me as the sole proprietor of the business responsible for all its liabilities and to debit such accounts with all checks purporting to be drawn thereon, provided they are signed by me or by my attorney as _____

Registration No. (if any) _____

Signature (to be signed in individual capacity without stamp)

Place :

Date :

INSTRUCTIONS / DECLARATION

OPERATION INSTRUCTIONS Single Either of Survivor Former of Survivor Any one or Survivor Jointly by all PA Holder Mandate Holder

By _____

STATEMENT OF A/C AND CHEQUE BOOK FREQUENCE

Statement frequency :

Current Account Monthly Fortnightly* Weekly* Daily*

Receive Statment By e-mail* Collect personally

Cheque Book Yes No *Subject to charges applicable

LETTER OF AUTHORITY FOR COLLECTION, NEGOTIATION OF BILLS, CHEQUES AND DRAFTS ETC.

In the case of collection of cheques and drafts sent by me/us to you, I/We request you, on the strength of my/our guarantee and on my/our responsibility to confirm my/our guarantee of the prior endorsements. I/We undertake to indemnify you against all losses, damages, or detriment and keep you protected from all claims, actions and expenses by reason of your so confirming my / our guarantee. As I/We send you from time to time cheques and bills on places where your bank has no branch, I/we hereby authorise you on my / our responsibility to accept this letter as your authority for sending such cheques and bills for collection through other sources or direct for payment to the bankers on which the cheques and bills are drawn. I/We hereby undertake to hold you harmless in this connection if the instrument is lost in transit or otherwise and I / We further undertake to receive the proceeds of such bills only after the same have been cashed by you. In the event of bills being discounted by you, I/we further undertake to repay your bank immediately, on demand, the proceeds of such bills. I /We agree to abide by all the rules of the bank now in force or to be brought into force hereafter.

LETTER OF AUTHORITY

I/We hereby authorize you to honour all cheques / drafts drawn on the above account and to accept and act upon receipt for money deposited with or owing by the Bank on any account (s) at any time(s) kept in the above account with the Bank provided such cheques or drafts are signed by Mr./Mrs. _____, whose specimen signature is duly countersigned by me / us notwithstanding at such cheques or drafts may create overdrawng or to increase it to any extent. Mr. Mrs. _____ is also authorized on my / our behalf to make, draw, accept, endorse and negotiate or otherwise sign any Hundies, Bills of Exchange and Promissory Notes or other Negotiable Instruments, to operate or overdraw on the above account with your Bank, to receive payments of all money due to me / us, to acknowledge debit(s) due from me / us, or to me / us, as to me / us all to pledge or hypothecate to the Bank any stocks or other form of securities belonging to me any one or more of us on my/our behalf to borrow either with or without security, to withdraw any stock or other Securities pledged, to give valid receipt for such securities and stock and to receive notices on my / our behalf, execute necessary documents relating to my / Our business with your Bank including guarantees and to issue guarantees on my / our behalf with or without security. This authority shall continue to be in force Until / We revoke it by a notice in writing delivered to you.

Yours faithfully,

(Signature of letter of Authority Holder)

(Counter Signature by account holder)

TAX DEDUCTION AT SOURCE

Tax to be Deducted at Source (TDS), if applicable : Yes / No.
 If No, please produce 15 H (Senior Citizens) or 15 G (Others)

STANDING INSTRUCTION DETAILS

I / We request you to debit my/our account bearing no. _____ with a sum of Rs. _____ every _____ and transfer the amount to _____.

MATURITY & PAYMENT INSTRUCTIONS

On Maturity of Deposit : Renew principal plus interest (automatically) Renew principal only (automatically) Do not renew Pay Cash (if maturity value is <Rs.20000)

Issue Pay order / DD Credit to account No. _____

For regular interest payment : Monthly Quarterly Half yearly yearly Waive TDS (Form 15G/15H enclosed) (to be submitted for every financial year)

Issue Pay order / DD Credit to account No. _____

Due date notice to be sent : Yes / No

Is the depositor is a, senior citizen : Yes / No

If senior citizen provide age proof details

In the event of death of the customer, premature termination of the term deposits would be allowed, subject to usual procedures, and such closure would not attract any penal charge.

INSTRUCTIONS / DECLARATION

Flexi Deposit

In case of insufficient balance in my/our Savings Account, please clear my/our cheque / allow withdrawal by closure / premature closure by breaking units of my/our fixed deposits.

Signature _____

(1) I/We have read and understood the Terms and Conditions (a copy of which I/We am/are in possession of) governing the opening of an account with TMB and those relating to various services including but not limited to (a) ATMs (b) Anywhere Banking Accounts. (2) I / We accept and agree to be bound by the said terms and conditions including those/limiting the Bank's liability. (3) I/We understand that the Bank may, at its absolute discretion, discontinue any of the service completely or partly without any notice to me/us. (4) I/We agree that the Bank may debit my/our account for service charges / folio charges as applicable from time to time. (5) I/We confirm that I/We am/are residents of India. (6) I / We agree to notify the Bank in future if I/We avail any credit facility from any other bank and I / We authorize you to inform the existence of my/our account with you to the lending banker. (7) I / We shall be liable to you for any monies owing to you from time to time in case the account is overdrawn and debit balance is caused including your commission, interest and other incidental charges. (8) In the event of death or insolvency or withdrawal of any of us the survivor/s shall have full control of any monies standing to my / our credit in our account with you and the survivor/s will have full powers to operate the account / close the account. (9). I / We request and authorize you to honour all cheques and other orders drawn or bills of exchange accepted or notes made on our behalf, to debit such cheques to my/our account with you whether such accounts be for the time being in credit or overdrawn. (10) I/We also request you to accept the endorsement signed by me / us on cheques / orders / bills or notes payable to us. (11). The cheques / bills presented by me/us in our account for collection are at our sole risk and responsibility and the bank is not liable for any loss or damages in case the instruments are lost in transit. (12) If there are high incidences (ie. more than 3) cheque returns for want of funds in my/our account, the Bank reserves the right to close the account under intimation to me /us. (13) The floating rate of interest is subject to floating interest rate fixed by the bank from time to time and notified by the bank and no separate intimation or notice will be given to the depositor. (14) I/We hereby undertake to route non-commercial / non-business transactions only through the Savings Bank account. The bank has the right to close or freeze my / our account if found contrary. (15) I / We undertake to maintain stipulated minimum average balances in Savings / Current / Anywhere banking accounts. I / We also know that non-maintenance attracts penal charges and continued non-maintenance will make the bank to close the account without any notice. (16) If there is no transaction by me/us for continuously 24 months the account will be treated as inoperative / dormant account. I / We have to give fresh written request letters for reactivation along with the ID and Address proof. (17) I / We know that the bank reserves right to close the account if my/our account remains with zero balance for three months or more continuously. (18) I / We know that the bank has posted the charges for the basic services in the Notice Board of the branch and in the Bank's website www.tmb.in. The bank need not inform me/us through letters / mails any change in charge structure. (19) I / We do hereby declare that the information furnished in this form is true to the best of my / our knowledge and belief. (20) I / We declare that I / We have had no insolvency proceedings initiated against me / us nor have I / We ever been adjudicated s insolvent. (21) I / We agree and understand that TMB Ltd reserves the right to retain the application forms and the documents provided herewith including the photographs will not be returned to me / us. (22) I / We agree and understand that TMB Ltd reserves the right to reject any application without assigning any reason. (23) For the purpose of providing certain services the Bank is / may be required to engage the service of specialized and other service providers / agents. I / We agree that the bank may/would be required to furnish any information regarding my / our account to these service providers / agents. (24) The bank will not be liable for any losses caused by force majeure, riot, war or natural events or by reason of an order passed by any judicial or regulatory authority or due to other occurrences for which the bank is not responsible (e.g. strike, lock-out, traffic hold-ups, administrative acts of regulatory authorities). (25) I / We also know that the opening / operating / closing of any account is subject to the extant know Your Customer (KYC) guidelines drafted in line with the RBI norms.

Internet Banking Services (IBS): (1) The Bank may offer IBS to selected customers at its discretion and has the right to accept or reject such application as may be submitted by the customers. The customer acknowledges that he/she possesses knowledge of the Internet usage and will have legal access to the Internet. (2) The information provided to the user through the Internet Banking is not updated continuously but at regular intervals. The Bank shall not be liable for any loss that the user may suffer by relying on or acting on such information. (3) The Bank may keep its records of the transactions in an form it wishes. In the event of any dispute, the Bank's Records shall be binding as the conclusive evidence of transactions carried out through Internet Banking in the absence of clear proof that the Bank's records are erroneous or incomplete. (4) Any request for any service, which is offered as a part of Internet Banking, shall be binding on the user as and when the Bank receives such a request. If any request for a service is such that it can not be given effect to unless it is followed up by requisite documentation on the part of the user, the Bank shall not be required to act on the request until it receives such documentation from the user. (5) The customer hereby absolves and holds blameless the Bank from any claim or damages in respect of any delay on the part of the Bank in carrying out any instructions given by the customer over the internet, where such delay is on account of technology failure, or other reasons beyond the control of the Bank. In cases of technological failure, the Bank shall endeavor to keep the downtime to the minimum. (6) The customer shall also be responsible for maintenance of the secrecy of the personal details of the accounts at all times. (7) The Bank reserves the right to charge and recover from the customer service charges for providing the Internet Banking Services. (8) In no case, the Bank will be held liable for erroneous transactions incurred arising out of or relating to the customer entering wrong account numbers. (9) Illegal or improper use of the Internet Banking shall render the user liable for payment of financial charges as decided by the Bank or will result in suspension of the operations through Internet Banking. (10) TMB does not warrant that access to the Website and Internet Banking, shall be uninterrupted, timely, secure, or error free, nor does it make any warranty as to the results that may be obtained from the website of use, accuracy or reliability of Internet Banking. (11) TMB will not be liable for any virus that may enter the customer's system as a result of using Internet Banking. TMB does not guarantee to the customers or any other third party that Internet Banking would be virus free. (12) The customer agrees that TMB may disclose, in strict confidence, to other institutions, such personal information as may be reasonably necessary for reasons inclusive of but not limited to participation in any telecommunication or electronic clearing network, in compliance with a legal directive, for credit rating by recognized credit scoring agencies, or for fraud prevention purpose. (13) TMB shall have the right of set-off and lien, irrespective of any other lien or charge, present as well as future, on the deposits / scrips held in the account(s) or in any other account, whether in single name or in joint name(s), to the extent of all outstanding dues, whatsoever, arising as a result of the Internet Banking extended to and / or used by the customer.

Core banking : (1) The bank shall facilitate payment and collection of cheques through all its branches while I / We shall have one account at the branch (for short "Parent Branch"). Bank shall also accept cash from me / us or my / our representatives and pay in cash against presentation of cheques drawn by me / us in favour of myself / ourselves or third party to the credit or debit to my / our designated account with the parent Branch as the applicable limits for the account. The cash transaction will be on the same lines as in the case when deposits / withdrawals take place at the parent branch. (2) While the instruments and for on my / our behalf will be collected in local clearing, the credit in respect of the proceeds, there under will be afforded at the parent branch and subject to realization at the respective satellite branch(es). (3) The bank will be entitled to debit by its parent and satellite branch(es) my / our account for the cheques presented in the respective centres. (4) My / our written information of "Stop payment" to the various branches of the Bank will be at my / our risk and I / we agree to agree to

grant a lead time of at least 24 hours for intimation of such "stop payment" instruments to all its branches. In case of mutilated or erroneous information which may emerge by or due to any communication error and if the "stop payment" is not carried out in good faith based in the said information, the bank shall not be held responsible for the said act. (5) I / We agree at any given time to maintain the average balance in my / our account as applicable for the account and informed to us by the bank. In the event of my / our failing to maintain the minimum average balance and for conduct of the account found unsatisfactory by the bank, the bank will at its option be entitled to forthwith terminate the facility hereby granted to me / us or to levy service charges as mutually agreed upon at the time of opening of the account and the later amendments made / to be made by the bank from time to time. (6) I / We agree to inform my / our existing bankers for the avilment of any of the facilities hereby granted to me / us. I. we also agree from time to time to furnish such information details and the documents to the existing bankers and also to the bank as is mandatory under the law and in force from time to time or at the bank regards necessary and / or expedient under the banking practice / procedure or to maintain the comity and fair play between the bank and the other bankers. (7) The agreement herein contained shall not affect, prejudice or derogate from the bank's rights and privileges under the law including the right to claim set off, general and the bankers disposing or retaining lien or similar rights pertaining to my / our credit balance in the account with the bank. (8) In the event of any malfunctioning and / or break-down in which case the bank will not in any manner be liable and / or responsible for to me / us for any damages compensation and / or for any other consequences arising out of such suspension. (9) I / We agree to hold the bank indemnified in case the bank suffers any loss on account of operation of the scheme for my / our benefit.

1 1st Applicant Please paste color photo here Please do not use pins, staples or tape	2 2st Applicant Please paste color photo here Please do not use pins, staples or tape	3 3st Applicant Please paste color photo here Please do not use pins, staples or tape	Applicants Signatures <div style="border: 1px solid black; height: 25px; margin-bottom: 5px;">1</div> <div style="border: 1px solid black; height: 25px; margin-bottom: 5px;">2</div> <div style="border: 1px solid black; height: 25px;">3</div>
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Form No. 60 (See third provision to rule 114B)

Form of Declaration to be filed by a person who does not have either a Permanent Account Number of General Index Register Number and who makes payment in cash in respect of transaction specified in clauses a) to (h) of rule 114B

1. Full Name and Address of the Declarant _____
2. Particulars of Transaction :
3. Amount of the Transaction:
4. Are you assessed to Tax? : Yes / No
5. If yes, (i) Details of Ward / Circle / Range where the last return of income was filed?
 (ii) Reasons for not having Permanent Account Number / General Index Register Number? _____

Verification
 I, _____ do hereby declare that what is stated above is true to the best of my knowledge and belief.
 Verified today, the _____ day of _____, 20_____
 Date : _____
 Place : _____ Signature of the Declarant

INTRODUCTION DETAILS

Introduction by the existing TMB Customer : Name

Customer ID Account No.

I confirm that I am an account holder with Tamilnad Mercantile Bank Ltd for over 6 months. I confirm that I personally know the applicant/s detailed herein for more than 6 months and confirm his / her identity and address.

Introduction by existing banker
 (Signature verification certificate is required) Signature of Introducer _____

For Bank Use :

I hereby declare that this account opening form is complete in all respects. I have verified the signature of the introducer and it is found correct. All the signatories have signed in my presence. All KYC norms are fully complied with. Relevant documents have been obtained. I have met Mr. /Ms. _____, Mr./Ms. _____ and Mr./Ms. _____ in person. I authorise opening of the account. I have verified the documents produced for identity and address proof with the original and certified to that affect on the copies.

Date _____

Manager/Sub Manager/Asst. Manager's Name _____ P.A. No _____ Signature _____

NOMINATION NOT REQUIRED

I / We, at present, do not want to nominate any one. I / We will contact the bank / branch if needed in future.

Signature of Account Holder

NOMINATION FORM - DA 1

(to be obtained in case of deposit A/cs in the name of Individuals in Single / Joint names)

Registration No. _____

Nomination under Section 45 ZA of the Banking Regulation Act 1949 and Rule 2(1) of the Banking Companies (Nomination Rules 1985 in respect of Bank deposits).

I / we _____
nominate the following person to whom in the event of my / our / minor's death the amount of deposit in the account (s) mentioned below may be returned by Tamilnad Mercantile Bank Ltd., _____ (Branch)

NOMINEE (Only One Nominee per Deposit Account)

Nature of Account & No.	Name & Address	Relationship if any	Age	If minor** his/her date of birth	Additional details (if any)

** As the nominee is a minor as on this date, I / We appoint Mr./Mrs. _____ Aged _____ Resident of _____ to receive the amount of deposit in the account on behalf of the nominee in the event of my / our / minor's death during the minority of the nominee.

DECLARATION

In the event of my / our death prior to the maturity of the deposit, the bank will at the request of the person who has been nominated by me / us to receive the deposit money after my / our death, be at liberty, though not bound and at its absolute discretion to repay the deposit before maturity or to grant an advance against the security there of and such repayment before maturity would constitute a valid discharge for the bank.

*Signature(s) Thumb Impression(s) of Depositor(s)

Witness(es)***

1. Name _____	2. Name _____
Signature _____	Signature _____
Address _____	Address _____

*When deposit is made in the name of a minor the nomination must be signed by a person lawfully entitled to act on behalf of the minor. *** Strike out if nominee is not a minor. ***Two witnesses shall attest Thumb impression (s) & one witness will attest signature.

NOMINATION REGISTER PARTICULARS

Nomination Register No. _____ Folio No. _____ Serial No. _____
for Tamilnad Mercantile Bank Ltd.

Authorised Signatory

**ACKNOWLEDGEMENT FOR NOMINATION REGISTRATION
(TO BE RETURNED TO THE CUSTOMER AFTER REGISTRATION OF NOMINATION)**

Name of the Depositors / And Address		Account Number
Nomination in favour of	Registered on	For Tamilnad Mercantile Bank Ltd.
		Officer / Manager

PERSONAL INFORMATION		TAMILNAD MERCANTILE BANK LTD _____ BRANCH	NAME OF THE APPLICANT		YOUR DATE OF BIRTH	
In order to serve you better we would appreciate if you could fill up this form. The information will be kept strictly in confidence			CUSTOMER ID		DD MM YYYY	
MARITAL STATUS	DEPENDENTS	EDUCATION	DEPENDENT'S NAME		D.O.B.	RELATIONSHIP
<input type="checkbox"/> MARRIED <input type="checkbox"/> SINGLE	<input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER <input type="checkbox"/> CHILDREN	<input type="checkbox"/> DOCTORATE <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> GRADUATE <input type="checkbox"/> POST-GRADUATE <input type="checkbox"/> OTHERS	1.			
			2.			
			3.			
SPOUSE DETAILS			4.			
OCCUPATION _____ E-MAIL ID _____			5.			
MONTHLY INCOME RS. _____ BANKING WITH _____						
EMPLOYMENT DETAILS						
OCCUPATION	<input type="checkbox"/> SALARIED	<input type="checkbox"/> SELF EMP / PROFESSIONS	<input type="checkbox"/> BUSINESS	<input type="checkbox"/> RETIRED	<input type="checkbox"/> STUDENT	<input type="checkbox"/> OTHERS
PROFESSION	<input type="checkbox"/> DOCTOR	<input type="checkbox"/> CA	<input type="checkbox"/> ARCHITECT	<input type="checkbox"/> SOFTWARE / IT	<input type="checkbox"/> LAWYER	<input type="checkbox"/> JOURNALIST
	<input type="checkbox"/> CONSULTANT	<input type="checkbox"/> ICWA / ACS	<input type="checkbox"/> ENGINEER	<input type="checkbox"/> BANK STAFF	<input type="checkbox"/> OTHERS (PL. SPECIFY)	
EMPLOYED WITH (SALARIED)	<input type="checkbox"/> PUB LTD CO	<input type="checkbox"/> PVT LTD CO	<input type="checkbox"/> GOVT UNDERTAKING	<input type="checkbox"/> MNC	<input type="checkbox"/> OTHERS	DATE OF RETIREMENT
GRADE	<input type="checkbox"/> CLERK	<input type="checkbox"/> OFFICER	<input type="checkbox"/> JR MANAGEMENT	<input type="checkbox"/> MIDDLE MGT	<input type="checkbox"/> SR MGT	No. OF YRS IN SERVICE
MONTHLY HOUSEHOLD INCOME	<input type="checkbox"/> < Rs. 5000	<input type="checkbox"/> 5001 - 10000	<input type="checkbox"/> 10001 - 20000	<input type="checkbox"/> 20001 - 30000	<input type="checkbox"/> 30001 - 50000	<input type="checkbox"/> 50000 plus
ASSET OWNERSHIP						
ASSETS	<input type="checkbox"/> COMPUTER	<input type="checkbox"/> MOBILE	<input type="checkbox"/> TWO WHEELER	<input type="checkbox"/> HOUSE	<input type="checkbox"/> COMMERCIAL PROPERTY	<input type="checkbox"/> CAR MAKE _____ MODEL YEAR _____
	<input type="checkbox"/> TV	<input type="checkbox"/> FRIDGE	<input type="checkbox"/> WASHING MACHINE	<input type="checkbox"/> MICRO OVEN	<input type="checkbox"/> MUSIC SYSTEM	
RESIDENCE						
RESIDENCE	<input type="checkbox"/> SELF OWNED	<input type="checkbox"/> FAMILY RESIDENCE	<input type="checkbox"/> COMPANY PROVIDED	<input type="checkbox"/> RENTED	<input type="checkbox"/> PURCHASED ON LOAN	
CREDIT CARD						
IF YES : , NO OF CARDS OWNED _____ NO OF YEARS SINCE CARD OWNED _____ NAME OF THE MOST FREQUENTLY USED CARD _____						
BANKING ACTIVITIES						
ACCOUNTS WITH OTHER BANKS	<input type="checkbox"/> NATIONALISED	<input type="checkbox"/> PRIVATE SECTOR	<input type="checkbox"/> CO-OPERATIVE	<input type="checkbox"/> FOREIGN	<input type="checkbox"/> MAIN BANKER _____	
INVESTMENT PREFERENCE						
<input type="checkbox"/> PREFERRED INVESTMENTS <input type="checkbox"/> BANK DEPOSIT <input type="checkbox"/> COMPANY DEPOSIT <input type="checkbox"/> MUTUAL FUNDS <input type="checkbox"/> SHARES <input type="checkbox"/> PPF <input type="checkbox"/> GOLD <input type="checkbox"/> PROPERTY <input type="checkbox"/> INSURANCE <input type="checkbox"/> OTHERS						
LOANS						
LOANS AVAILED DURING LAST 3 YEARS <input type="checkbox"/> CAR <input type="checkbox"/> HOUSING <input type="checkbox"/> DURABLES <input type="checkbox"/> AGAINST SHARES <input type="checkbox"/> BUSINESS <input type="checkbox"/> AGAINST GOLD <input type="checkbox"/> OTHERS						
PRESENT LOAN REQUIREMENTS, IF ANY :						
TMB SERVICES AVAILED OF						
<input type="checkbox"/> DD/LD <input type="checkbox"/> FTFT <input type="checkbox"/> RTGS <input type="checkbox"/> e-TRANSFER <input type="checkbox"/> TMB HOME <input type="checkbox"/> TMB TRADERS <input type="checkbox"/> TMB TWO WHEELER <input type="checkbox"/> TMB EDUCATION						
<input type="checkbox"/> TMB PERSONAL <input type="checkbox"/> TMB DOCTOR <input type="checkbox"/> TMB MAHALIR <input type="checkbox"/> TMB TRUCK <input type="checkbox"/> TMB TRACTOR <input type="checkbox"/> MKD <input type="checkbox"/> NMD <input type="checkbox"/> SRD						
<input type="checkbox"/> KIDS RD <input type="checkbox"/> PEARL <input type="checkbox"/> INDIA CARD <input type="checkbox"/> KISAN CREDIT CARD <input type="checkbox"/> GCC <input type="checkbox"/> TMB DOUBLE <input type="checkbox"/> OTHERS						
DECISION TO OPEN THE ACCOUNT WAS INFLUENCED BY						
<input type="checkbox"/> PRESS ADVT <input type="checkbox"/> CONVENIENT LOCATION <input type="checkbox"/> ATM LOCATION <input type="checkbox"/> EMPLOYER'S BANK <input type="checkbox"/> RECOMMENDED BY FRIENDS						
<input type="checkbox"/> APPROACHED BY BANK STAFF <input type="checkbox"/> INTERNET ADVT <input type="checkbox"/> TELE CALLING						
INTERNET ACCESS			TRAVEL ABROAD			
<input type="checkbox"/> OFFICE <input type="checkbox"/> HOME <input type="checkbox"/> NOT APPLICABLE			YOU TRAVEL ABROAD ON <input type="checkbox"/> WORK <input type="checkbox"/> FAMILY <input type="checkbox"/> HOLIDAYS		RELIGION	
COMMUNITY			WISH TO REGISTER YOUR NAME IN "DO NOT CALL" REGISTER : Yes / No.			
<input type="checkbox"/> OBC <input type="checkbox"/> MBC <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OTHERS			Thanking you for providing the information			

