

ONLINE ACCOUNT OPENING / APPLICANT INFORMATION FORM FOR RESIDENT INDIVIDUALS

Reference No. 240	12622295756943342	Customer ID.	Account No.				
Account Scheme	JDSA Purpose of A	CCOUNT Online Account	Account Type Lea	ad Id			
1. Applicant Details:							
Title	Full Name						
Mr.	Pradyumn Tiwari						
Father's Name	DWARIKA PRASAD TIWARI						
Mother's Name	Usha Tiwari	Usha Tiwari					
Date of Birth	Gender Married	Spouse Name	Maiden Name Ex-service Man	PAN No.			
10/07/2004	Male Single		Y	CHUPT9159A			
Residential Status	Place of Birth	Place of Birth Country of Birth Physically/visually handicapped		Aadhaar No.			
RESIDENT INDIAN	Pratapgarh	INDIA	Y	520840257008			
Occupation SM	IALL FARMERS			Code AG001			
Education	Nationality	Religion	Caste	Village Code			
	INDIAN	HINDU	GENERAL				
Name of Employer / Profession / Nature of Business / Industry							
2. Communica	tion / Residence Ad	ldress:					
House No.40							
Shivpur khurd Kala							
City/District PRATA	NPGARH	State	UTTAR PRADESH	Country INDIA			
Pin 230401	Phone No.		Mobile No. 8439886549				
E-mail ID pradyumntiwari8439@gmail.com							
3. Permanent A	Address:						
House No.40							
Shivpur khurd Kala							
City/District PRATA	NPGARH	State	UTTAR PRADESH	Country INDIA			
Pin 230401	Phone No.		Mobile No.				

4. Knov	4. Know Your Customer (KYC) Details:							
KYC Num	nber (If any)							
Attach the copies of the documents opted for and produce the original copies of these documents for verification.								
		Code	Document Identifica	tion No.	Date of Expiry	Issuing Aut	nority	Place of Issue
Identity F	Proof:	ID108	520840257008					
		Code	Document Identifica	tion No.	Date of Expiry	Issuing Aut	nority	Place of Issue
Residence	ce Proof:							
Annual Fa	amily Income	e Less than Rs	. 50,000		Source	of Income Profes	sion	
Net Worth	h Less thar	n Rs. 10 Lacs						
5. Infor	mation	on Credit	Facilities Avail	ed:				
I Pradvu	ımn Tiwari	further undertak	e that:					
_ `			Non fund based) facility	with Union Book	other Bank/s OP			
I enjo	by credit facil	lity/have current	accounts with Union Ba	nk/other Bank/s	and the details ar	e as under		
Vehic	cle loan	Housing lo	Consumer	Ioan	Educational loan	Business lo	oan	Credit Card
Na	ame of the B	ank & Branch	Accou	int No.		Facility		Amount
	l'ele De							
o. Facil	lities Re	quirea:						
	_	_	s if you wish to avail the	_	_			
Account Type Regular Gold Platinum Privilege								
Y Cheque Book Collect from Branch Y Dispatch to my communication address								
Statement by E-Mail Y Mobile Banking Y Debit Card Y Nomination Required Y SMS Alerts Required								
Sweep-in-facility: Please clear my Cheque/allow withdrawal by transferring funds from my Saving/Current A/C No.								
Foreign Remittances expected Country Code No.								
7. Information details required under Tax Laws:								
If the individual is tax resident in more than one country then below information may be repeated for all such countries								
S.No.	Date of docu	ument collected	Country of Residency	for Tax purpose	s Tax Identific	cation Number(TIN) equivalent	or functional	TIN issuing country

8. Declaration/Undertaking:

- 1. I Pradyumn Tiwari certify that I have declared my status as per the applicable FATCA/CRS rules in India as notified by Government of India (GOI) /Central Board of Direct taxes (CBDT) /Reserve Bank of India (RBI)/in this regard.
- 2. I certify that the information stated in the account opening form and the supporting documentary evidence provided by me is, to the best of my knowledge and belief true, correct and complete and that I have not withheld any material information/document, that may affect the assessment/categorization of the account at a US Reportable account/Other Reportable account or otherwise.
- 3. I undertake the responsibility to declare, disclose and recertify within 30 days any changes that may take place in the information provided in the account opening form, and signed by me as well as in the documentary evidence provided by me or if any certification becomes incorrect.
- 4. I also agree that our failure to disclose any material fact known to me, now or in future, may invalidate my application and Union Bank of India would be within its right to put restrictions in the operations of my account or take appropriate action permissible under the Indian regulations for the purpose or take any other action as may deemed appropriate if the deficiency is not updated/rectified by me within the stipulated period.
- 5. I agree to furnish any particulars/information that is called upon me by Union Bank of India on account of any change in law either in India or abroad in the subject matter herein.
- 6. In the event there is any tax demand (including interest (if any)) raised due to non-disclosure/inaccurate disclosure of information/document on my/our part, I undertake to pay the demand forthwith and provide the Bank with all information/documents that may be necessary for any proceedings before GOI/RBI/Income-tax Authorities.
 7. I permit/authorize the Bank to collect, store, communicate and process information relating to the Account and all transactions therein, by the Bank and any of its affiliates
- 7. I permit/authorize the Bank to collect, store, communicate and process information relating to the Account and all transactions therein, by the Bank and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.

I confirm having received , read and understood the accounts rules and hereby agree to be bound by the terms and conditions outlined in these rules which govern the account(s) which I am opening with Union Bank of India and amendments there to made from time to time will be binding on me/us when displayed by the bank on its notice board or on its website and those relating to various services offered by the bank including but not limited to International debit card/ Internet banking/ SMS banking/Mobile banking / Tele - banking and other facilities listed in this form. I am aware that the usage of these facilities is governed by the terms and conditions which are displayed on https://www.unionbankonline.co.in , the site maintained by Union Bank of India and I have reviewed the contents of the same. I understand that the bank may at its absolute discretion discontinue any of the services completely or partially without any notice to me. I agree that the bank may debit my account for service charges as applicable from time to time. I declare that the transactions in the account will be made from legitimate sources only the account will not be used for any purpose contrary to law. I declare that the information furnished above is true and correct to the best of my knowledge.

Account Number						
Name of Applicant						
Branch PRATAP	GARH		Paste your passport size photograph and			
Mode of Operation	of Account Single		sign across the photograph and also in			
			the box provided below			
Date						
Place						
For Bank Use Only						
9. CUSTOMER DUE DILIGENCE:						
Income tax paid during the last two years < Rs. 10,000 Rs. 10,000 - 50,000 Rs. 50,000 - 1 Lac > Rs. 1 Lac						
Comments:						
PAN Verification from www.incometaxindia.gov.in						
Applicant's name checked with Suspicious entities list KYC Documents verified with originals						
The applicant is KYC compliant Y N Politically Exposed Y N						
and relevant docum signature is obtaine Name:	at this account opening form is complete in all respects tents have been obtained, verified with originals and ad in physical presence of the applicant.	I(Name of Bran Employee No.:hereby authoriz P.A. No.:	ch Head/Operations Head), ed/permitted to open the account.			
Emp. No. : Date :	 Signature:	Date : Signa	ture:			

NOMINATION (NOMINATION FORM DA-1):

Nomination under sec. 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 nominate the following person to whom in the event of my death the amount in the above account, may be returned by Union Bank of India PRATAPGARH Branch. Nature of Deposit Saving Bank Account No. Name of nominee Title **Full Name** Usha Tiwari Relationship with depositor MOTHER Age Whether name of the nominee to be printed on Pass Book /Statement of Account/Deposit Receipt Address House No.40 Shivpur khurd Kala City/District PRATAPGARH State UTTAR PRADESH Country INDIA 230401 Phone No. Mobile No. E-mail ID Date of Birth in case of minor @ @ As the nominee is minor on this date I/We appoint Title **Full Name** to recieve the amount of deposit on behalf of nominee in the event of my/our minor's death during the minority of the nominee. Insurance (Death due to accident) Nomination for Primary Debit Card Name Relation Date of Birth Nomination for Add-on Debit Card Name Relation Date of Birth *Signature / thumb Impression of **Depositor** Name of Primary Depositor Name of Witness/es Name & Address of Witness 1 Name & Address of Witness 2 Date **Place Signature of Witness1 Signature of Witness2** *Thumb impression(s) shall be attested by two Witnesses Acknowledgement for Nomination nomination form DA-1 for making nomination from Pradyumn Tiwari in respect of saving bank account. Recieved on _ Deposit Account No. For Union Bank of India Nomination Registration No.

Authorised Signatory