



BALITIKURI CO-OPERATIVE BANK LTD.

Regd. Office : HOWRAH-AMTA ROAD, BALITIKURI, HOWRAH – 711 113.

Ph : 2653-1446/6283/0759, Fax : 2653-1446/6283, email : bcbltd@yahoo.com

Dear Customer,

Date:

Kindly fill up the form given below and submit the same to the Branch

immediately.

The details are required to designate your account(s) as **KYC Compliant**.

Please note that your A/c operation may be stopped for want of these details.

PHOTO

P/SIZE

1. Name of Account Holder: (Capital letter only)

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2. Father's/Husband's Name:

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3. Date of Birth (DD/MM/YYYY):

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4. Nationality:

5. Mobile No. :

6. Occupation:

Residential Address

Area / Para :																			
Land Mark :																			
P.O. :																			
P.S. :																			
Pin Code :																			

Permanent Address

Area / Para																			
Land Mark																			
P.O.																			
P.S.																			
Pin Code																			

7. Account No. : SB.....CA.....TD.....

Loan A/c..... CC.....

8a. Proof of Identity : Passport PAN Card Voters Card
(Attach any one self attested copy) Driving License
Other(specify).....

8b. Whether photograph submitted: Yes /No. (If not please submit)

9. Proof of Address : Electricity Bill Telephone Bill
(Attach any one self attested copy) Passport Ration Card
Govt./Defence ID Card Others(specify)
Driving License

10. Dealing with other Bank : Name of Bank(s).....

(Signature of Account Holder)

(Signature of Account Holder)

(For Office use only)

Customer's Signature verified :

Name of officer :

Signature.....

Date :