

DCB Home Loan Application Form

DCB Home Loan DCB Flexi Home Loan



Application No. _____

Application Date _____

PLEASE FILL IN BLOCK LETTERS ONLY

Personal Details (To be filled in case applicant / co-applicant / guarantor is an individual)

Preferred Mailing Address: Res. **Off.**

	Applicant	<input type="checkbox"/> Co-applicant <input type="checkbox"/> Guarantor
*Account Type	<input type="checkbox"/> Regular <input type="checkbox"/> Simplified (for low risk customers) <input type="checkbox"/> Small	<input type="checkbox"/> Regular <input type="checkbox"/> Simplified (for low risk customers) <input type="checkbox"/> Small
Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mx. <input type="checkbox"/> Dr.	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mx. <input type="checkbox"/> Dr.
Name	First Name Middle Name Last Name	First Name Middle Name Last Name
CKYC No.		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender
Father's / Spouse's Full Name		
Mother's Full Name		
Mother's Maiden Name		
Communication Address	Flat / Building / Plot No.	Flat / Building / Plot No.
Area / Locality		
Landmark	PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	City State	City State
Residence Address	Flat / Building / Plot No.	Flat / Building / Plot No.
Area / Locality		
Landmark	PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	City State	City State
Current Address	Flat / Building / Plot No.	Flat / Building / Plot No.
Area / Locality		
Landmark	PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	City State	City State
No. of years at current residence	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Current residence is	<input type="checkbox"/> Self owned <input type="checkbox"/> Family <input type="checkbox"/> Rented <input type="checkbox"/> Company's	<input type="checkbox"/> Self owned <input type="checkbox"/> Family <input type="checkbox"/> Rented <input type="checkbox"/> Company's
Rent per month, if rented	No. of dependants _____	No. of dependants _____
Phone No. with STD code		
Mobile No.		
E-mail ID		
Relationship with Applicant	N.A.	
Date of Birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other
Qualifications	<input type="checkbox"/> Graduate <input type="checkbox"/> Post-Graduate <input type="checkbox"/> Other _____	<input type="checkbox"/> Graduate <input type="checkbox"/> Post-Graduate <input type="checkbox"/> Other _____
Religion		
Consent for Opening Savings Account	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Category	<input type="checkbox"/> OBC <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> DT / NT <input type="checkbox"/> MBC <input type="checkbox"/> Others _____	<input type="checkbox"/> OBC <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> DT / NT <input type="checkbox"/> MBC <input type="checkbox"/> Others _____
Residential Status	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin

FATCA Details:			
U.S. Person	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please fill FATCA Declaration form if you are USA or other country citizen / resident
Country of Birth			
*Place of Birth			
*Citizenship			
*Residence for Tax Purposes			
Proof of Address	<input type="checkbox"/> Passport <input type="checkbox"/> Driving Licence <input type="checkbox"/> UID (Aadhaar) <input type="checkbox"/> Voter ID <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Other _____ <input type="checkbox"/> Letter issued by National Population Register	<input type="checkbox"/> Passport <input type="checkbox"/> Driving Licence <input type="checkbox"/> UID (Aadhaar) <input type="checkbox"/> Voter ID <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Other _____ <input type="checkbox"/> Letter issued by National Population Register	
Proof of Identity	Passport No. _____ Expiry Date _____ Driving Licence No. _____ Expiry Date _____ Voter Identity Card No. _____ NREGA Job Card _____ UID (Aadhaar): <input type="checkbox"/> Yes <input type="checkbox"/> No PAN: _____ Letter issued by National Population Register _____	Passport No. _____ Expiry Date _____ Driving Licence No. _____ Expiry Date _____ Voter Identity Card No. _____ NREGA Job Card _____ UID (Aadhaar): <input type="checkbox"/> Yes <input type="checkbox"/> No PAN: _____ Letter issued by National Population Register _____	

Business / Employment Details

To be filled in case applicant / co-applicant / guarantor is non-individual. Details of employer to be filled in the case of salaried employee.

	Applicant		<input type="checkbox"/> Co-applicant	<input type="checkbox"/> Guarantor
Occupation	<input type="checkbox"/> Salaried <input type="checkbox"/> Self Employed Professional <input type="checkbox"/> Other _____	<input type="checkbox"/> Self Employed <input type="checkbox"/> Other _____	<input type="checkbox"/> Salaried <input type="checkbox"/> Self Employed Professional <input type="checkbox"/> Other _____	<input type="checkbox"/> Self Employed <input type="checkbox"/> Other _____
Salaried	<input type="checkbox"/> Public Ltd. <input type="checkbox"/> Pvt. Ltd. <input type="checkbox"/> PSU <input type="checkbox"/> State <input type="checkbox"/> MNC <input type="checkbox"/> Other _____		<input type="checkbox"/> Public Ltd. <input type="checkbox"/> Pvt. Ltd. <input type="checkbox"/> PSU <input type="checkbox"/> State <input type="checkbox"/> MNC <input type="checkbox"/> Other _____	
Nature of Business / Employer				
Name of the Concern / Employer				
Designation				
Business / Employment Add				
		PIN <input type="text"/>		PIN <input type="text"/>
	City _____ State _____		City _____ State _____	
No. of Years in Current Business / Employment	<input type="text"/> <input type="text"/> Date of Commencement _____		<input type="text"/> <input type="text"/> Date of Commencement _____	
Phone No. with STD code				
Fax No. with STD code				
PAN				
Company Identification Number (CIN)				
GST Number				
Udyam Registration No.				
Details of Previous Business / Employment		Total Work Experience		Total Work Experience

Directors / Partners (Applicant)	First	Second	Third
DIN			
Name			
Address			
	PIN <input type="text"/>	PIN <input type="text"/>	PIN <input type="text"/>
Phone No. with STD code			
PAN	<input type="text"/>	<input type="text"/>	<input type="text"/>
Proof of Identity			
Date of Birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mother's Full Name			
Father's / Spouse's Full Name			
Proof of Address	<input type="checkbox"/> Passport <input type="checkbox"/> Driving Licence <input type="checkbox"/> Voter ID <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> UID (Aadhaar) <input type="checkbox"/> Other _____	<input type="checkbox"/> Passport <input type="checkbox"/> Driving Licence <input type="checkbox"/> Voter ID <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> UID (Aadhaar) <input type="checkbox"/> Other _____	<input type="checkbox"/> Passport <input type="checkbox"/> Driving Licence <input type="checkbox"/> Voter ID <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> UID (Aadhaar) <input type="checkbox"/> Other _____

Reference 1 (From relative only)
Name _____
Relationship _____
Address _____

Phone _____ Mobile _____

Reference 2
Name _____
Relationship _____
Address _____

Phone _____ Mobile _____

Bank Account Details

Name of Account Holder	Name of Bank	Branch	Account Operated Since	Account No.	Account Type (SB / CA / OD)

Credit Card Details

Name of Bank	Card Number	Year of Issue	Year of Expiry	Card Limit	Current Outstanding (INR)

Existing Relationship with DCB Bank Limited

Loan Account Number	Bank Account No.	Other

Income / Assets / Liabilities Details

	Applicant	Co-applicant / Guarantor
	VALUE	VALUE
ANNUAL TURNOVER	₹ _____	₹ _____
GST Paid in Last Quarter	₹ _____	₹ _____
INCOME		
Gross Monthly Income	₹ _____	₹ _____
Net Monthly Take Home	₹ _____	₹ _____
Other Income (specify sources)	₹ _____	₹ _____
Average Monthly Expenses	₹ _____	₹ _____
Monthly Instalments you Pay (Total Amount)	₹ _____	₹ _____
ASSETS		
1. Property and other Assets	₹ _____	₹ _____
2. Motor Vehicles	₹ _____	₹ _____
3. Fixed Deposit (if any)	₹ _____	₹ _____
4. Current Balance in Public Provident Fund	₹ _____	₹ _____
5. Current Balance in Provident Fund (your share)	₹ _____	₹ _____
6. Other Investments (bonds / securities)	₹ _____	₹ _____
7. Sum assured under life insurance policies	₹ _____	₹ _____
Total Household Income – combined all sources for the family	₹ _____	₹ _____

	Applicant			Co-applicant / Guarantor		
LIABILITIES	Balance Outstanding (₹)	Balance Term (Months)	Balance Repayment (₹)	Balance Outstanding (₹)	Balance Term (Months)	Balance Repayment (₹)
Name & address of institution from whom loan has been availed with purpose of loan						
1.						
2.						
3.						
Total Liabilities	₹			₹		

Property Details

Property Address	Flat / Building / Plot No.	Area of Land	
Area / Locality		Area of Flat / House / Office	
		Property Type	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial
		Ownership Type	<input type="checkbox"/> Sole <input type="checkbox"/> Joint
	PIN <input type="text"/>	Approximate Market Value	₹
Nearest Landmark		Present Owner	

Loan Details

Loan Amount: _____	Loan Tenure: _____ years	
Interest Rate: <input type="checkbox"/> Floating Rate	<input type="checkbox"/> Fixed Rate <input type="checkbox"/> Fixed and Floating Rate	
Balance Transfer <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes then, Organisation Name: _____	
<input type="checkbox"/> Seller Balance Transfer	Outstanding Amount: ₹ _____ Tenure Served: _____	
For Home Loan <input type="checkbox"/> Resale <input type="checkbox"/> Builder Purchase (Ready)	<input type="checkbox"/> Under Construction (Builder Purchase) <input type="checkbox"/> Self Construction <input type="checkbox"/> Plot + Construction	
Purpose of loan	Estimate of requirement of funds	Estimate of sources to meet requirement of funds
Purchase of Residential Property <input type="checkbox"/>	1. Total purchase price / construction cost ₹ <input type="text"/>	4. Loan requested ₹ <input type="text"/>
Home Construction <input type="checkbox"/>		5. Savings from Bank ₹ <input type="text"/>
Home Renovation <input type="checkbox"/>	2. Incidental costs (if any) ₹ <input type="text"/>	6. Disposal of investments (fixed deposits / shares etc.) ₹ <input type="text"/>
	3. Other costs ₹ <input type="text"/>	7. Amount already spent (source _____) ₹ <input type="text"/>
	Please specify	8. Provident Fund (refundable/non-refundable) ₹ <input type="text"/>
	Total requirement of funds ₹ <input type="text"/>	9. Other (specify _____) ₹ <input type="text"/>
	A. (Sum of 1 to 3) Total	Estimate of sources of funds ₹ <input type="text"/>
		B. (Sum of 4 to 9) Total

Note: 'A' which is the total requirement of funds, should equal estimate of sources, 'B' which indicates the sources from the cost will be met. **It is important that you indicate in detail, the sources from where the cost will be met in order to help us process your application faster.**

Processing Fee Details

Processing fee (non-refundable): ₹ _____	Cheque / DD Number _____	Dated _____
Drawn on _____ in favour of DCB Bank Limited.		

I / We agree to open a Savings / Current Account with DCB Bank Limited.

Yes No

DCB Current and Saving Accounts come with a host of benefits such as IMPS / NEFT / RTGS, Payable at Par Cheque Book, Phone / Internet / Mobile Banking, Any Branch Banking and much more.

Applicant's photo
Signed across /
Thumb impression

Co-applicant's / Guarantor's
photo signed across /
Thumb impression

Declaration

- I / We declare that all the particulars and information and details given / filled in this application form are true, correct, complete and up to date in all respects and that I / we have not withheld any information whatsoever and I / we understand and accept that they shall form the basis of any facility DCB Bank Limited (the "Bank") may decide to grant me/us. The Bank has the right to reject the application in case any of the information provided in this application form is found to be false / incorrect / misleading.
- I / We confirm that there are no insolvency or bankruptcy proceedings or suits for recovery of outstanding dues or monies whatsoever or for attachment of my / our assets or properties and / or any criminal proceedings have been initiated and / or are pending against me / us and that I / we have never been adjudicated insolvent or bankrupt by any Court or other authority.
- No action nor other steps have been taken or legal proceedings started by or against me / us in any court of law / other authorities for winding up, dissolution, administration or re-organization or for the appointment of a receiver, administrator, administrative receiver, trustee or similar office or for my / our assets.
- I / We unconditionally authorise the Bank to exchange, share or part with all the information / data or documents and details relating to my / our application and / or existing loans and / or repayment/credit history to other banks, financial institutions, credit bureaus, agencies, IT department, statutory/regulatory bodies, etc., as the Bank may deem necessary or appropriate as may be required for use of processing of the said information / data by such person(s).
- I / We understand, agree and acknowledge that the Bank shall have the absolute discretion, without assigning any reasons, to reject my / our application and that I/we reserve no right to appeal against this decision of the Bank. I/We further agree that the Bank shall not be responsible / liable in any manner whatsoever to me / us for such rejection or any delay in notifying me / us of such rejection and any costs, losses, damages or expenses, or other consequences, caused by reason of such rejection or any delay in notifying me / us of such rejection of our application.
- The Bank reserves the right to retain the photographs and documents submitted and will not return the same to the applicant and/or co-applicant and/or guarantor.
- I am / We are neither related to any of the Directors of the Bank nor I am / we are his / her relatives as defined under the provisions of the Companies Act, 2013.
- I / We have been explained the product features of the loan I / we have applied for. I / We have been explained the detailed document checklist of the loan as mentioned in Bank's website www.dcbbank.com. I / We have understood the terms and conditions of Home Loan/ Business Loan/ DCB Flexi Home Loan product of the Bank and I / we agree to abide by them.
- From time to time, the Bank communicates various features / products / promotional offers which offer significant benefits to its customers and may use the services of third party agencies to do so.
 - I / We expressly authorise the Bank to use information or data relating to me / us, for communicating marketing offers as outlined above.
 - I / We do not wish to receive offers as outlined above.
- I / We understand that processing fee and administration fee are non-refundable and my / our application being rejected by the Bank for any reason or same being withdrawn by me/us, I / we shall not be entitled to refund of same.
- I / We hereby unconditionally authorise the Bank to make any enquiries with any other finance company / bank / credit bureau / Reserve Bank of India (RBI) / agency/ies appointed by RBI regarding my / our credit history with them.
- I / We confirm that the funds will not be used for speculative or anti-social purpose.

13. I / We further authorise the Bank, and or its associates / subsidiaries / affiliates and has / have NO OBJECTION, to verify any information of or at my/our office / residence and/or contact me/us and /or my/our family members and / or my/our employer / Banker / Credit Bureau and also to conduct any checks for all my/our submitted documents and other information pertaining to the policies of the Bank.
14. I / We undertake to inform the Bank regarding the change in my/our occupation/employment and to provide any further information and documents that the Bank may require from time to time.
15. I / We agree that my/our facility shall be governed by the terms and conditions of the Bank that are in force and may be amended by the Bank at its absolute discretion from time to time.
16. I / We have understood, acknowledge and agree that a request and demand for any information and documents by any authority under the law will be mandatorily complied with by the Bank.
17. I / We agree as a pre-condition of the facility given to me/us by the Bank and in that case, I/we commit default in the repayment of the facility or in the payment of interest thereon or any of the agreed instalment of the facility on the due date(s), the Bank and/or the Reserve Bank of India (RBI) will have an unqualified right to disclose or publish my/our name (including my/our photograph) as defaulter/s in such manner and through such medium as the Bank or RBI in their absolute discretion may think fit.
18. It will be in order for the Bank to disqualify / deny me/us from receiving any credit facility(ies) from the Bank in case it is proved that the declaration of my/our existing credit facility(ies) made above contains misrepresentation of facts.
19. I / We hereby give specific consent to the Bank for disclosing / submitting the 'financial information' as defined in Section 3 (13) of the Insolvency and Bankruptcy Code, 2016 ('Code' for brief) read with the relevant Regulations/ Rules framed under the Code, as amended and in force from time to time and as specified there under from time to time, in respect of the guarantees given, securities created for securing the said facilities availed by the Borrower from the Bank, from time to time, to any 'Information Utility' ('IU' for brief) as defined in Section 3 (21) of the Code, in accordance with the relevant Regulations framed under the Code, and directions issued by Reserve Bank of India to the banks from time to time and hereby specifically agree to promptly authenticate the financial information submitted by the Bank, as and when requested by the concerned IU.
20. In case of Guarantor, if applicable, I / we undertake to guarantee the loan granted by the Bank to me/us.
21. I agree that my personal Know Your Customer (KYC) information may be shared with Central KYC (CKYC) registry or any other competent authority. I hereby give consent to receive information from the Bank / CKYC registry / the Government / Reserve Bank of India or any authority through SMS / email on my registered mobile number / email address. I also agree that non receipt of any such SMS / email shall not make the Bank liable for any nature of loss or damage.
22. I hereby give consent to the Bank to retrieve my information from CKYC registry for the purpose of this loan processing or any other relationship with DCB Bank.
I/We shall not hold the Bank liable for sharing of information furnished by me with other banks / financial institutions / credit providers / any other entities.
I/We understand that the Bank is relying on the information provided in this application form for the purpose of determining the status of the applicant named above in compliance with FATCA (Foreign Account Tax Compliance Act) / CRS (Common Reporting Standards). The Bank is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions. I/We agree to submit a new form within 30 (thirty) days if any information or certification in this application form becomes incorrect or incomplete or not up-to-date. I/We agree that as may be required by domestic regulators/tax authorities the Bank may also be required to report, reportable details to CBDT (Central Board of Direct Taxes) or close or suspend my / our account. I/We certify that I/we have provided the information in this application form and to the best of my/our knowledge and belief the information and certification is true, correct, up-to-date, and complete including the taxpayer identification number of the applicant.
23. I hereby declare and confirm that I am not a "PEP- Politically Exposed Person" nor related to any such party in any form, which is, or is deemed to be registered with the Election Commission of India as a political party under the Election Symbols (Reservation and Allotment) Order, 1968 as in force for the time being.

Aadhaar consent:

I/We have voluntarily submitted my/ our Aadhaar/ UID Number mentioned in this application form and consent to:

- Seed my/ our Aadhaar/ UID Number issued by UIDAI, Government of India in my/our name with my/ our aforesaid account.
- Map it at NPCI (National Payments Corporation of India) to enable me/ us to receive Direct Benefit Transfer (DBT) from Government of India in my/ our above mentioned account. I/ we understand that if more than one Benefit Transfer is due to me/ us, I/ we will receive all Benefit Transfers in this account.
- Use my/ our Aadhaar details to authenticate me/ us from UIDAI.
- Use my/our mobile number mentioned in my/our account for sending SMS alerts to me/ us.
- Consent for Authentication: I/ we, the holder of the UID (Aadhaar) stated in this application form, hereby give my/ our consent to the Bank to obtain my/ our UID (Aadhaar), name and fingerprint/ Iris for authentication with UIDAI. The Bank has informed me/ us that my/ our identity information would only be used for demographic authentication/ validation/ e- KYC purpose and also informed that my/ our biometrics will not be stored / shared and will be submitted to CIDR (Central Identities Data Repository) only for the purpose of authentication.

I/we have been given to understand that my/our information submitted to the Bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law.

Signature / Thumb Impression of Applicant _____ Name of Applicant: _____ Date: _____	Signature / Thumb Impression of Co-applicant / Guarantor _____ Name of Co-applicant / Guarantor: _____ Date: _____
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Name of the Executive	Branch	Branch Employee Name	Channel Name

Signature

Sourcing Channel

Name of Executive	Branch	Branch Employee Name	DSA	Scheme

Services

SMS Banking & Alert Facility:

I / We don't wish to receive any Bank related promotional calls, SMS alerts or emails. Yes No

Phone Banking Preferred Language Options: English Hindi Marathi Gujarati Tamil Telugu

Terms and conditions:

I/We have read, understood and hereby agree to the "Terms and Conditions as applicable to my / our account" set forth on DCB Bank Limited ("DCB Bank", "the Bank's") website at www.dcbbank.com. I / We understand that access to any changes / updates in terms and conditions applicable to this relationship shall be available on the Bank's website only. I / We shall adhere to all the terms and conditions as applicable from time to time.

Witness(es):

Name : _____ Signature : _____ Address : _____ _____ Place : _____ Date: _____	Name : _____ Signature : _____ Address : _____ _____ Place : _____ Date: _____	Thumb impression is required to be attested by 2 witnesses. For signature, no witness is required.
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For Bank Use Only

Loan Application received on _____. Processing Fee (cheque / DD) received on _____.

Request will be disposed of and acceptance / rejection notification will be mailed within 15 (fifteen) days from the date of the receipt of duly completed application form with all supporting documents, as required by DCB Bank.

KYC verification / OSV carried out by

Employee Name & Code: _____

Employee Designation: _____ Branch: _____

Dated:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Authorised Signatory

Annexure – "R"

Details of The Beneficial Owners

Name	DOB (MM/DD/YY) (If available)	Nationality	Occupation / Profession	Residential address (With email IDs & Landline / Mobile numbers)

For Companies (Private & Public)

Shareholders with more than 25 % of Shares / Capital (whether acting alone or together or through one or more judicial person would be treated as BOs)

Partnership accounts / Trusts (Public / Private) / Association of Persons (AOP) more than 15% interest (Capital / Profit) in the Partnership / Trust / AOP

For Partnership firms, signatures of all the partners in the account to be obtained

For others, either all authorised signatories may sign OR those as per mandate in the account OR by the directors/trustees who have signed on the resolution

For

Partners / Directors / Trustees / Authorised Signatories / AOPs
(Signature to be done under rubber stamp of the entity)

Customer Information & Due Diligence (CIDD)

Information Type	Applicant	Co-applicant
Countries where business associates located (for Businessmen, only)		
Country where the Individual / Entity based		
Nature of business / Line of activity (in detail)		
Expected number of transactions in a month	<input type="checkbox"/> Upto 20 <input type="checkbox"/> 21 to 50 <input type="checkbox"/> More than 50	<input type="checkbox"/> Upto 20 <input type="checkbox"/> 21 to 50 <input type="checkbox"/> More than 50
Financial Status (Net Worth)	<input type="checkbox"/> Upto ₹10 Lakh <input type="checkbox"/> More than ₹10 Lakh upto ₹25 Lakh <input type="checkbox"/> More than ₹25 Lakh upto ₹50 Lakh <input type="checkbox"/> More than ₹50 Lakh upto ₹2 Crore <input type="checkbox"/> More than ₹2 Crore	<input type="checkbox"/> Upto ₹10 Lakh <input type="checkbox"/> More than ₹10 Lakh upto ₹25 Lakh <input type="checkbox"/> More than ₹25 Lakh upto ₹50 Lakh <input type="checkbox"/> More than ₹50 Lakh upto ₹2 Crore <input type="checkbox"/> More than ₹2 Crore
Source of Funds for Credits in the Account	<input type="checkbox"/> Savings <input type="checkbox"/> Salary <input type="checkbox"/> Business Proceeds <input type="checkbox"/> Sale of Property <input type="checkbox"/> Investments <input type="checkbox"/> Inheritance <input type="checkbox"/> Professional fee <input type="checkbox"/> Other (please specify) _____	<input type="checkbox"/> Savings <input type="checkbox"/> Salary <input type="checkbox"/> Business Proceeds <input type="checkbox"/> Sale of Property <input type="checkbox"/> Investments <input type="checkbox"/> Inheritance <input type="checkbox"/> Professional fee <input type="checkbox"/> Other (please specify) _____

Wire Transfers Expected	Into the Account <input type="checkbox"/> Yes <input type="checkbox"/> No Value ₹ _____ From the Account <input type="checkbox"/> Yes <input type="checkbox"/> No Value ₹ _____	Into the Account <input type="checkbox"/> Yes <input type="checkbox"/> No Value ₹ _____ From the Account <input type="checkbox"/> Yes <input type="checkbox"/> No Value ₹ _____
Foreign Inward Remittances Expected	<input type="checkbox"/> Yes <input type="checkbox"/> No Approximate Value ₹ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No Approximate Value ₹ _____
Foreign Outward Remittances Expected in a Year	<input type="checkbox"/> Yes <input type="checkbox"/> No Approximate Value ₹ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No Approximate Value ₹ _____
Signature of Primary Applicant		

Details of Other Group Accounts Held (Applicable to Non-Individual Accounts)

Account Holder's Name	Constitution of the Account	Beneficial Owners

Signature of the Applicant / Co-applicant / Authorised Signatory / Beneficial Owner / POA holder
(CIDD for entity must have rubber stamp of the firm)

(To be filled-in by the staff sourcing the account)

Any of the Signatories / Beneficial Owners of the entity a Political / Public Figure or related to a Political / Public Figure?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please give position:
Are there any other concerns for higher AML risks?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please give position:
Please confirm if the customer is involved in any one of the following profession	Real Estate Dealers / Bullion Dealers & Jewellers / Stock Brokers / Forex Dealers / Cash Couriers & Money Service Bureau (for entities only)/ Antique Dealers & Dealers in Arms (individuals and entities) and Defence / Weapons procurement – Traders & Manufacturers (Non-Government) / Liquor Bars / Importers / Exporters	

I confirm that I have carried out KYC verification and proper due diligence and I am satisfied with the profile of the prospective customer.
Details of staff sourcing the account

Employee Name & HRMS : _____

Employee Designation: _____

Branch : _____

Date: _____

Employee's Signature

DCB Customer Care

Call 022 68997777 ■ 040 68157777

Email customercare@dcbbank.com

Web www.dcbbank.com

DCB BANK

FORM NO. 60 (See second provision to rule 114B)

Form for declaration to be filed by an individual or a person (not being a company or firm) who does not have a permanent account number and who enters into any transaction specified in rule 114B

1	First Name	Middle Name	Surname	2	Date of Birth / Incorporation of Declarant
3	Father's Name (in case of individual): First Name		Middle Name	Surname	
4	Flat/ Room No.	5	Floor No.		
6	Name of Premises	7	Block Name/No.		
8	Road/ Street/ Lane	9	Area/ Locality		
10	Town/ City	11	District	12	State
13	Pin code	14	Telephone Number (with STD code)	15	Mobile Number
16	Amount of Transaction (₹)	18	In case of transaction in joint names, number of persons involved in the transaction		
17	Date of Transaction	19	Mode of transaction: <input type="checkbox"/> Cash, <input type="checkbox"/> Cheque, <input type="checkbox"/> Card, <input type="checkbox"/> Draft/Banker's Cheque, <input type="checkbox"/> Online transfer, <input type="checkbox"/> Other		
20	Aadhaar Number issued by UIDAI (if available)				
21	If applied for PAN and it is not yet generated enter date of application and acknowledgement number				
		D	D	M	M
		Y	Y	Y	Y
22	If PAN not applied for, fill estimated total income (including income of spouse, minor child etc. as per Section 64 of Income-tax Act, 1961) for the financial year in which the above mentioned transaction is held				
	a. Agricultural income (₹)		b. Other than agricultural income (₹)		
23	Details of document being produced in support of identify in Column 1 (Refer below Instruction)			Document code	
	Document identification number	Name and address of the authority issuing the document			
24	Details of document being produced in support of address in Columns 4 to 13 (Refer below Instruction)			Document code	
	Document identification number	Name and address of the authority issuing the document			

Verification

I, do hereby declare that what is stated above is true to the best of my knowledge and belief. I further declare that I do not have a Permanent Account Number and my/ our estimated total income (including income of spouse, minor child etc. as per section 64 of Income-tax Act, 1961) computed in accordance with the provisions of Income-tax Act, 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax.

Verified today, the _____ day of _____ 20

Place:

(Signature of declarant)

Note:

- Before signing the declaration, the declarant should satisfy himself that the information furnished in this form is true, correct and complete in all respects. Any person making a false statement in the declaration shall be liable to prosecution under Section 277 of the Income Tax Act, 1961 and on conviction be punishable,
 - (i) in a case where tax sought to be evaded exceeds twenty five lakh rupees, with rigorous imprisonment which shall not be less than six months but which may extend to seven years and with fine;
 - (ii) in any other case, with rigorous imprisonment which shall not be less than three months but which may extend to two years and with fine.
- The person accepting the declaration shall not accept the declaration where the amount of income of the nature referred to in item 22b exceeds the maximum amount which is not chargeable to tax unless PAN is applied for and column 21 is duly filled.

Instruction: (1) Documents which can be produced in support of identity and address (not required if applied for PAN and item 20 is filled): -

Sl.	Nature of Document	Document Code	Proof of Identity	Proof of Address	Sl.	Nature of Document	Document Code	Proof of Identity	Proof of Address
A	For Individuals and HUF					20. Bank account statement (Not more than 3 months old)	20	No	Yes
	1. Aadhar Card	01	Yes	Yes		21. Credit card statement (Not more than 3 months old)	21	No	Yes
	2. Bank/Post office passbook bearing photograph of the person	02	Yes	Yes		22. Depository account statement (Not more than 3 months old)	22	No	Yes
	3. Elector's photo identity card	03	Yes	Yes		23. Property registration document	23	No	Yes
	4. Ration/Public Distribution System card bearing photograph of the person	04	Yes	Yes		24. Allotment letter of accommodation from Government	24	No	Yes
	5. Driving Licence	05	Yes	Yes		25. Passport of spouse bearing name of the person	25	No	Yes
	6. Passport	06	Yes	Yes		26. Property tax payment receipt (Not more than one year old)	26	No	Yes
	7. Pensioner photo card	07	Yes	Yes	B	For Association of persons (Trusts)			
	8. National Rural Employment Guarantee Scheme (NREGS) Job Card	08	Yes	Yes		Copy of trust deed or copy of certificate of registration issued by Charity Commissioner	27	Yes	Yes
	9. Caste or Domicile certificate bearing photo of the person	09	Yes	Yes	C	For Association of persons (other than Trusts) or Body of Individuals or Local authority or Artificial Juridical Person			
	10. Certificate of identity/address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer as per annexure A prescribed in Form 49A	10	Yes	Yes		Copy of agreement or copy of certificate of registration issued by Charity commissioner or Registrar of Cooperative society or any other competent authority or any other document originating from any Central or State Government Department establishing identity and address of such person.	28	Yes	Yes
	11. Certificate from employer as per annexure B prescribed in Form 49A	11	Yes	Yes	(2)	In case of a transaction in the name of a minor, any of the above mentioned documents as proof of identity and address of any of parents/ guardians of such minor shall be deemed to be the proof of identity and address for the minor declarant, and the declaration should be signed by the parent/ guardian.			
	12. Kisan passbook bearing photo	12	Yes	No	(3)	For HUF any document in the name of Karta of HUF is required.			
	13. Arms license	13	Yes	No	(4)	In case the transaction is in the name of more than one person the total number of persons should be mentioned in Sl. No. 18 and the total amount of transaction is to be filled in Sl. No. 16.			
	14. Central Government Health Scheme /Ex-servicemen Contributory Health Scheme Card	14	Yes	No		In case the estimated total income in column 22b exceeds the maximum amount not chargeable to tax the person should apply for PAN, fill out item 21 and furnish proof of submission of application.			
	15. Photo identity card issued by the Government/ Public Sector Undertaking	15	Yes	No					
	16. Electricity bill (Not more than 3 months old)	16	No	Yes					
	17. Landline telephone bill (Not more than 3 months old)	17	No	Yes					
	18. Water bill (Not more than 3 months old)	18	No	Yes					
	19. Consumer gas card/book or piped gas bill (Not more than 3 months old)	19	No	Yes					

Acknowledgement

Application No.:

Loan Application received on _____ Processing Fee (cheque / DD) received on _____.

Request will be disposed of and acceptance / rejection notification will be mailed within 15 (fifteen) days from the date of the receipt of duly completed application form with all supporting documents, as required by DCB Bank Limited.

Dated:

D	D	M	M	Y	Y	Y	Y
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Employee Name: _____ HRMS No.: _____

Authorised Signatory