Registered Office: 'Cosmos Tower', Plot No. 6, ICS Colony, University Road, Ganeshkhind, Shivajinagar, Pune - 411007. Ph.: 020-67086708



दि कॉसमॉस को-ऑप. बँक लि. (मल्टिस्टेट शेड्यूल्ड बँक)

रजिस्टर्ड ऑफिस : 'कॉसमॉस टॉवर', प्लॉट नं. ६, आयसीएस कॉलनी, युनिव्हर्सिटी रोड, गणेशखिंड, शिवाजीनगर, पुणे – ४११००७. फोन: ०२०–६७०८६७०८

Email: customercare@cosmosbank.in | www.cosmosbank.com

Savings Account Opening Form for Resident Individual	Profile / निवासी भारतीयांसाठी बच	ात खाते चालू करणेसाठी अर्ज
Please open an account as per details given below (✓ whichever is applicable		
Branch / शाखा: Branch SOL ID:	The state of the s	
Account No./ खाते क्र.  If We wish to open an Account at your	Cosmo Salary / कॉरमो सॅलरी Jansanchay / जनसंचय	नांक प्रिचित्र हिंच करू इच्छितो.  Cosmo Royale / कॉस्मो रोयाल  BSBDA / बेसिक सेर्व्हींग डिपॉझिट अकाऊंट
I/We wish to avail of following E-Banking Service		ता घेळ दन्त्रियो
Cosmo RuPay Card Cosmo Visa Debit Card Youth Card		Cosmo Jansanchay Card
Name to be embossed on ATM / VISA Card		Cosmo dansantriay Card
Cosmo Net ( View only Transaction) 1st Holder	2nd Holder 3rd Holder A	
CosMobile- Mobile Banking SMS Banking (Mobile No		
Cosmo E-Statement (Frequency- Monthly Quarterly Six Mor		
	Standard School Standard School Standard	
	STATE OF THE PARTY AND STATE OF THE PARTY AND STATE OF THE PARTY.	
Personal Details / ਕੈਰ FIRST NAME	याक्तक माहिती MIDDLE NAME	CUDWAYE
1st Applicant's Mr/Mrs/Ms/M/s. Name श्री/श्रीमती/कु/मे.	MIDDLE (YEW)L	SURNAME SURNAME
पहिल्या अर्जदाराचे नावः Customer ID / ग्राहक क्र.:	User ID	User Level *
2nd Jt. Applicant's Mr/Mrs/Ms/M/s.		USEI LEVEI
Name श्री/श्रीमती/कु/मे.  Customer ID / ग्राहक क्र.:	User ID	*
3rd Jt. Applicant's Mr/Mrs/Ms/M/s.		User Level
Name श्री/श्रीमती/कु/मे.  Customer ID / ग्राहक क्र.:	User ID	User Level *
Operating Instructions Single / स्वतः Joint / संयुक्त Either or Survivo		
खाते वापराविषयी सूचना       Minor by Guardian / अज्ञान पालनकर्ता       Other (Plential Deposit: Cash Cheque (Cheque No Deposit:	ease Specify) / इतर (तपशील) late) Amount ₹	Section 1997 to the section of the s
For Minor's Account / अज्ञान	अर्जदाराचे खातेविषयी	
Name of the Parent / Natural Guardian पालकाचे नाव / नैसर्गिक पालनकर्त्यांचे नांव		
I hereby declare that the Date of Birth of the above minor who is my	is D D M M Y	Y Y and I am his/her
natural/legal guardian appointed by the court order dated(of tuture transactions of any description, in the above account until the Cosmos Co-op. Bank Ltd. against the claim of the above minor for मी जाहीर करतो / करते कि माझ्या / माझी जी/जो अज्ञान आहे, त् (तिची/त्याची) नैसर्गिक/न्यायालयाने नेमुन दिलेला कायदेशीर पालक आहे. (दाखल्याची प्रत प्रतिनिधित्व सर्व व्यवहारांकरीता करेन. त्याच्या/ तिच्या खात्यातील केलेल्या कोणत्याही व्यवहारां	he said minor attains majority. or any withdrawal /transaction n याची / तिची जन्मतारीख ा लिला जोडली आहे) वर उल्लेखित अनान व्यक्ति	sent the said minor in all I undertake to indemnify made in his/her account. प्रमुख अहे. मी तिचा/त्याचा
(Minor's Birth Certificate is mandatory / (अज्ञानाच्या जन्म तारखेचा दाखला अनिवार्य) Sig	gnature of Guardian / पालनकर्त्याची	ो सही
Account Usa		Const. W. Prince (1997)
	Deposits	Withdrawals
Anticipated number of cash transactions per month     Anticipated value of transactions per month		
Total funds expected to be deposited in to the account over next three months		690 3 3 2
Anticipated number of transactions per month (cheques / transfer etc.)	to the second se	The state of the s

Nomination Form - DA - 1 / नामांकन फॉर्म डी ए −१					
Contract of the Contract of th	sh to nominate ( ही नामांकन करू इ		No, I /We declare that I do not v नाही,मीं / आम्ही जाहीर करतो की र्म	wish to make a nom ो / आम्ही माझ्या / आग्	nination in my/our account. तच्या खात्यांस नामांकन करू इच्छित नाही.
(Nomination)	Rules, 1985 in	5 ZA read with section respect of bank depo ९८५ चे नियम २(१) नुसार नाम	sits. बँकेकरीता ठेवींबाबत बँकींग रेग	on Act, 1949 and युलेशन ॲक्ट, १९४९	l Rule 2 (1) of the Co-op. Banks चे कलम ५६ बरोबर कलम ४५ झेंड ए आणि
I/We [(Name(s मी/आम्ही (नांव व		)]			
	eturned by The	n to whom in the event of Cosmos Co-op. Bank Lt		mount of the depo Branch (N	osit, particulars whereof are given Name & address of branch/ office
माझ्या/आमच्या /अज्ञान पालनकर्त्या व्यक्तिच्या मृत्युनंतर दि कॉसमॉस को-ऑप. बँक लि. शाखेकडील ठेवीची रक्कम मिळण्यासाठी					
खालील व्यक्तिंचे नामनिर्देशन करीत आहोत. ठेवींबाबतचा तपशील खाली नमूद केला आहे.					
Nature of Deposit ठेवीचा प्रकार	Distinguishing No.	Name & Address of Nominee नामनिर्देशन दिलेल्या व्यक्तिचे नाव व पत्ता	Relationship with the Depositor, if any ठेवीदाराबरोबरचे नाते, असल्यास	Age of the nominee नामनिर्देशित व्यक्तिचे वय	lf Nominee is a minor his Date of Birth नामनिर्देशित व्यक्ति अज्ञान असल्यास, त्याची जन्मतिथी
As the nominee	is a minor on t	nis date, I / We appoint Mr	/Mrs/Ms. (Name, address & a	ge)	
		to recei	ve the amount of the dep	osit on behalf of	of the nominee in the event of
my/our/minor's death during the minority of the nominee. नामनिर्देशित व्यक्ति आजमितीस अज्ञान असल्यामुळे तो/ती सज्ञान होइपर्यंत माझ्या/आमच्या /अज्ञानाच्या मृत्युनंतर नामनिर्देशित व्यक्तिच्या वतीने ठेवीची रक्कम					
मिळण्याकरिता मी/आम्ही श्री/श्रीमती/कु.(नाव,पत्ता, आणि वय)					
					यांची नेमणूक करतो.
1]		2]		3]	
Witness: Two witnesses are necessary for nomination only when the / नामनिर्देशन करण्याकरीता खालील बाबींकरता दोन साक्षीदार आवश्यक आहेत.					
Depositor is illiterate / अशिक्षित ठेवीदार     Depositor is minor / अज्ञान ठेवीदार     Nominee is minor / नामनिर्देशित व्यक्ति अज्ञान असल्यास					
Witness: 1/ साक्षीदार: १ Witness:2/ साक्षीदार: २					
Signature / सही	Signature / सही				
Name / नाव	Name / नाव Name / नाव				
Address / पत्ता			Address / पत्ता		
Pulos & Pogulations / चारियवामा व सहस					

# Rules & Regulations / जाहरनामा व सूर

1. If you do not receive welcome letter within 2 weeks of the date of submission of the form kindly contact the branch.

2. The savings account should be used to route transactions of only non business / non commercial nature. In the event of occurrence of such transaction or any such transaction that may be construed or dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts and or close the account.

# Comprehensive Declaration & Instructions / जाहिरनामा व सूचना

I/We confirm having read and understood the account rules and hereby agree to be bound by the terms and conditions governing the account which I/We am / are opening / will open and amendment to the rules made from time to time and those relating to various services availed by me /us when displayed by the Bank on its Notice Board or on its website- www.cosmosbank.com and those relating to various services offered by the Bank including but not limited to ATM Card/ Debit Card / Internet Banking / SMS Banking / Mobile Banking / Flexi Fixed Deposit Scheme / Sweep in Sweep Out and other facilities offered by the Bank. The usage of these facilities is governed by the terms and conditions stipulated by the Bank from time to time.

I/We have read/ understood and agreed to 'Most Important Terms & Conditions' including the interpretation of rules, risk, limits, charges and other conditions.

I undertake that the saving account will be used to route transactions of only non business / non commercial nature. In event of occurrence of such transactions, Bank reserves the right to unilaterally freeze the account operations and / or close the account.

In case of joint accounts, instructions received from one of the account holders to stop operations will be deemed to be sufficient notice to the Bank to act upon such instructions. Further operations would be allowed only upon receipt of fresh instructions from all the account holders.

## For Salary Account

As per the arrangement my salary will be credited every month through your Bank. In case I cease to be an employee, by reason of my resignation, retirement, suspension or dismissal, I shall intimate in writing to your Bank. The Bank can convert my salary account to a regular savings account in case there are no salary credits in my account for 3 consecutive months. I undertake to complete KYC requirements, if and when called upon by the Bank for continuing operations in the account as a normal SB account. In case I fail to comply with Bank's requirements, you may suspend operations / close the account.

मी/आम्ही खाते वापरासंबंधीचे बँकेचे सर्व नियम,अटी व शर्ती वाचून पाहिल्या असुन त्या समजावून घेतल्या आहेत व त्या नियम, अटी व शर्तीस बांधील राहून मी/आम्ही सदरचे खाते उघडले आहे. अशा उघडलेल्या खात्यास मी /आम्ही ,बँक वेळोवेळी जे नियम करेल अथवा असलेल्या नियमात दुरूस्ती करेल अथवा त्यातून काही नियम रद्द करेल असे सर्व नियम माझेवर/आमचेवर बंधनकारक रहाणार असून असे सर्व नियम जे बँकेने तिच्या सुचना फलकावर किंवा संकेत स्थळावर प्रसिद्ध केले, तेही नियम माझेवर/आम्हावर बंधनकारक राहतील,

	For Office Use Only / कार्यालयीन कामकार	जाकरीता
Application Accepted By (	Branch Official): At the time of accepting the	application:
a semand all A/c No and A/c Hold	der (Customer ID) and Operation on	
Check and Confirm Email ID / Mo	bile No. / User Level for IB / MB	र स्वाने सक करण्यास हरकत नाही.
, , , , , , , , , , , , , , , , , , , ,	awad to open an account / No 91 men	Date WF No
Initial Amount ₹	DC No.	Ticket No.
Deter I I I I I I I I I I I I I I I I I I I		तिकिट क्र.
Name & Signature of the Officer /	अधिकाऱ्याचे नांव व स्वाक्षरी	
	For AOC (Account Opening Cell)	
		Ticket No.
Entered By : Name & Sig	nature(Intr	anat Sita)
Data El	ntry in ATM Card Application Management (Inter-	dilet one)
Cosmos M-Messaging	Data Entry in SMS Banking System (Intranscript	te)
The applicant A/C is act	tive & KYC complied.	
IB confirmation at requ	Derechalized Cheffle Dook Issued	(/Tick any one Box)
<u> </u>	Flexi Fixed Deposit Scheme (Auto o	weep) (Vilok any one box)
	has deposited / account debited by ₹/	- against charges of issuance of new
We have confirmed that custo	ansanchay Debit Card as per Banks rules & policy.	
in 10 found correct	tor filting processing.	Ticket No.
Name & Signature of the	Officer / अधिकाऱ्याचे नांव व स्वाक्षरी	Initial St.
Name & Sign	For ABC Cell	
DTO No. ID:	RTS No. MB	
RTS No. IB:		Ticket No.
Name & Signature of the	Officer / अधिकाऱ्याचे नांव व स्वाक्षरी	(Clique xv.
	Special Notes	
	submission of KYC documents:- o account operations initiated by customer for modelines. The accounts having no operations initiated	ore than one year will be treated as Inoperative
Saving account having no	account operations initiated by customer for me	ed by customer for more than two years will be
Accounts as per RBI guid	o account operations initiated by customer for modelines. The accounts having no operations initiated by customer for modelines.	and latest photographs along with
treated as Dormani Accou	t Account customer will have to submit latest KYO	C documents and latest priotograp
letter giving reasons for the	OII-Operation of door	
Li-Camileo Charo	IAS.	
Not maintaining the mining	num balance in Saving Account. e return unpaid for any reason. e-tuilthin 1 year from the date of opening of the acco	aunt —
Closure of Saving Account	e return unpaid for any reason.  nt within 1 year from the date of opening of the account within 1 year from the date of opening of the account within 1 year from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the account within 1 years from the date of opening of the date of opening of the date of opening of the date of the d	Societies / Clubs
	Declaration for Trusts / Associations /	he has I have been
		WIIO II a o
The account Will De OUE du	ed by the tiples of Associ	- d Desolution No
The account will be operate authorised by the Bye-Lav	ed by vs / Memorandum of Association / Articles of Association /	- d Desolution No
Dated of the fi	ed by	station / Trust Deed and Resolution No
Dated of the fit Directors / Authorised Sign	natories is attached herewith.	ciation / Trust Deed and Resolution No
Dated of the fit Directors / Authorised Sign Acopy of the Bye-Laws / T sent herewith. In future if a	Instellation is attached herewith.  Trust Deed / Memorandum of Association and Article in the name of the operators any change is required in the name of the operators are informed accordingly in writing by a	ciation / Trust Deed and Resolution No
Dated of the fit Directors / Authorised Sign Acopy of the Bye-Laws / T sent herewith. In future if a the Board of Trustees an	natories is attached herewith.  Trust Deed / Memorandum of Association and Article any change is required in the name of the operators and you will be informed accordingly in writing by a second control of the contro	ciation / Trust Deed and Resolution No
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Dated of the fit Directors / Authorised Sigr A copy of the Bye- Laws / T sent herewith. In future if a the Board of Trustees an operate upon the account We agree to comply with We have received the der	natories is attached herewith.  Trust Deed / Memorandum of Association and Article any change is required in the name of the operators and you will be informed accordingly in writing by a standard be bound by Bank's rules now and from time posit rules annexed to this account opening form are positively and account opening form are positively and provided the secondary of Finance.	ciation / Trust Deed and Resolution No
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Dated of the firm Directors / Authorised Sign A copy of the Bye- Laws / T sent herewith. In future if a the Board of Trustees an operate upon the account We agree to comply with We have received the degree when the shall submit prior per and you may not accept a	natories is attached herewith.  Trust Deed / Memorandum of Association and Article any change is required in the name of the operators and you will be informed accordingly in writing by a standard property of the control of the con	les of Association Dated duly certified is sof the account it will be effected by a resolution of all the trustees and you will allow such person to the to time in force for the conduct of such accounts. If or accepting foreign contribution within 3 months communication.
Dated of the firm Directors / Authorised Sign A copy of the Bye- Laws / T sent herewith. In future if a the Board of Trustees an operate upon the account We agree to comply with We have received the degree when the shall submit prior per and you may not accept a	natories is attached herewith.  Trust Deed / Memorandum of Association and Articlarly change is required in the name of the operators of you will be informed accordingly in writing by a standard be bound by Bank's rules now and from time posit rules annexed to this account opening form are mission communication from Ministry of Finance any foreign contribution till such time we submit the conduct of the conduction of the trust of the conduction of the trust of the conduction of the trust of the	station / Trust Deed and Resolution No. fied copy of the resolution signed by all Trustees / les of Association Dated duly certified is sof the account it will be effected by a resolution of all the trustees and you will allow such person to to to time in force for the conduct of such accounts. In agree to abide by the same. If or accepting foreign contribution within 3 months communication. In and that the foreign contribution received by the same and that the foreign contribution received by the same.
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Dated of the firm Directors / Authorised Sign A copy of the Bye- Laws / T sent herewith. In future if a the Board of Trustees an operate upon the account We agree to comply with We have received the der We shall submit prior per and you may not accept a We certify that this is the Trust will be strictly in account was a strictly in account to the firm of th	natories is attached herewith.  Trust Deed / Memorandum of Association and Article any change is required in the name of the operators and you will be informed accordingly in writing by a standard property of the control of the con	siation / Trust Deed and Resolution No

`सदरचे नियम ATM Card/ Debit Card / Internet Banking / SMS Banking/ Mobile Banking / FlexiFixed Deposit Scheme / Swipe in & Swipe out आणि इतर सर्व सवलतीकरताही लागु राहतील याची मला पर्ण जाणीव आहे.

मी/आम्ही अशी हमी देतों की मी/आम्ही सुरू केलेल्या बचत खात्याचा वापर फक्त बिगर व्यावसायिक अथवा बिगर व्यापारी कारणांकरीताच करेल. खात्याच्या बँकेच्या विहित नियमांव्यतिरिक्त वापर केल्यास अथवा खातेवापरांमध्ये कोणतीही चूक केल्यास सदरचे खाते एकतर्फी गोठविण्याचा अधिकार बँकेने राखून ठेवला आहे अथवा बँकेने एकतर्फी खाते बंद करण्याचा निर्णय आम्हास मान्य अथवा कबुल आहे.

मी/आम्ही असे नमुद करतों की, संयुक्त बचत खात्यासंदर्भात आमच्यापैकी कोणत्याही एका बचत खातेधारकाने बचत खात्यावरील व्यवहार थांबविण्याबाबत सुचना दिल्यास सदरची सुचना ग्राह्य मानुन बँक सदर खात्यावरील व्यवहार बंद करेल याची आम्हास जाणीव आहे, तसेच या खात्यावर पुन्हा व्यवहार चालू करण्याकरीता सर्व खातेधारकांनी मान्यता दिल्यानंतर सदर खात्याचे व्यवहार चाल करण्यात येतील.

माझ्या वेतनासंबंधी झालेल्या करारानुसार माझे दरमहाचे वेतन माझ्या खात्यात बँकेमार्फत जमा करण्यात येईल. जर मी नोकरीचे सेवा कालावधीमध्ये सदर नोकरीचा राजीनामा दिल्यास, सेवा निवृत्त झाल्यास, मला कामावरून कमी केल्यास अथवा माझ्या विरुद्ध चौकशी चालू असल्यास मी त्या बाबत स्पष्ट सूचना आपल्या बँकेस देईन. माझ्या बचत खात्यामध्ये ३ महिने अथवा त्यापेक्षा जास्त कालावधीचे वेतन जमा झाले नाही तर बँक सदरचे खाते वेतन बचत खाते मधून साधे बचत खाते म्हणून संबोधेल व अशा खात्यास बँकेच्या नियमाप्रमाणे नियम लागु राहतील व वेतन खाते म्हणून ज्या सवलती असतील त्या सर्व आपोआप बंद होतील. सदर खात्याबाबतची केवायसी बाबतची पूर्तता करण्याची हमी देतो / देते. जर मी वरील प्रमाणे पूर्तता केली नाही तर माझे/आमचे खातेवरील व्यवहार थांबविण्याचे अथवा खाते बंद करण्याचे अधिकार बँकेस राहतील हे मी मान्य व कबल केले आहे.

## For Premium / Royale Account

Bank reserves the right to revise the charges applicable to any of the chargeable services or to discontinue any of the free services without prior notice. Other rules applicable to Saving Bank Account will be applicable to requested scheme. If I/We fail to maintain the prescribe balance in the account under requested scheme, for consecutive 4 quarters, Bank reserves the right to shift the account to Regular Saving Account Scheme and withdraw the benefits offered under requested scheme without prior notice. I/We hereby given my/our consent for the same.

### For Net / Mobile Banking

- In case you find multiple customer IDs attached for my different accounts, I accept & agree to merge those multiple customer IDs in one customer ID, as per RBI directive which will also be used as authenticated login user ID for Internet Banking / Mobile Banking.
- I/We authorize the applicant to access the account(s) via the channels selected further. We accept and agree to be bound by the said terms and conditions for the use of Internet Banking / Mobile Banking selected services.
- Cosmos Bank shall not be responsible and liable to monitor the nature of expense incurred by the use of the said Net Banking facility.
- · All transactions carried in the above mentioned account/s through use of the Net Banking facility shall be binding on the corporate entity and Cosmos Bank shall all times be kept saved and harmless from all actions, claims, demands, proceedings losses, damages cost, charges and expenses whatsoever which Cosmos Bank may at any time incur, suffer or to be put as a consequence of or by reason of or arising out of transaction carried out through the Net Banking facility.
- Cosmos Bank shall at all times be informed of any change in the operating instructions for Net Banking facility by furnishing necessary documents in writing and in such events to change the Net Banking password forthwith.
- I/We further agree that since the mode of operation of our Account is joint (one initiator & all other approvers), the transction/s initiated by any one holder will have to be approved by other joint holder/s. I/We further affirm, confirm and undertake that I/We will be responsible for any action by any of us using Internet Banking Facility.
- I/We hereby state that should I/We wish to charge/revoke the above authorization, I/We shall duly submit a change mandate to that effect to the Bank. I/We hereby agree that till 10 (ten) working days, after receipt of such change mandate existing account operations shall be hold good.
- I confirm that I will keep all banking information and password securely. I will not share any of important banking information to any unknown person.

I/We confirm that I/We have read and unhave signed in the presence of Bank Office	derstood the above Dec	claration, and that the details	provided on the form are	correct. I /We also confirm that I /We
Name	Name		Name	
Signature of 1st Applicant		Signature of 2nd Applicant		Signature of 3rd Applicant