



LAKHDATAR ASHRAY NIDHI LIMITED

लखदातार आश्रय निधि लिमिटेड

Always with you

HELP LINE NUMBER
0512 - 3100273

Registered Office - 122/690 "B" Shastri Nagar, Kanpur - 208005 U.P.

CIN NO - U64990UP2023PLN181688, PAN NO - AAFCL3947H, TAN NO - KNPLO1566F, GST NO - 09AAFCL3947H1Z8

✉ info@lakhdatarnidhi.com 🌐 www.lakhdatarnidhi.com 📞 8948882277 | 7887018885

INDIVIDUAL ACCOUNT OPENING FORM FOR RESIDENT INDIANS

• Please complete this form in Black Ink and in CAPITAL LETTERS or where applicable Application Date

DD	MM	YY	YY
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• Initial Payment in cash is accepted only at Lakhdatar Nidhi Branches • Account opening cheque should be in favour of the account holder only
Customer ID (If applicable)

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 CKYC Number (If applicable)

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TELL US ABOUT YOURSELF

Applicant Name

Title	First Name	Middle Name	Last Name
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Date of Birth

DD	MM	YY	YY
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Gender - Male Female Third Gender
Marital Status Married Unmarried Others **Citizenship (Applicable for other than India)**

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Applicant Maiden Name

Title	First Name	Middle Name	Last Name
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Place of Birth

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Country of Birth

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For Tax Residents of countries in addition to India, please complete below:

Country of Tax Residence

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Foreign Tax Identification Number

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TIN Issuing Country

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Separate annexed to be executed in case of dual country of tax residence

Overseas Jurisdiction Address Type Address is same as Officially Valid Document Address is same as communication
 Address is different (Please update Overseas Jurisdiction separately)

Father's Name (Mandatory, if customer does not have PAN) **Spouse Name**

Title	First Name	Middle Name	Last Name
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Mother's Name (As per OVD, no proof required)

Title	First Name	Middle Name	Last Name
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PLEASE HELP US WITH DETAILS OF ONE OR MORE DOCUMENTS BELOW

Aadhaar No.

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Voter ID

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Driving License

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Passport

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 PIO/OCI Card

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PAN*

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 Form 60
*If you have a PAN it is mandatory to provide details to the bank at the time of opening an account. If you do not have a PAN, please complete a Form 60.

Expiry Date

DD	MM	YY	YY
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Expiry Date

DD	MM	YY	YY
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Expiry Date

DD	MM	YY	YY
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NREGA

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National Population Register (NPR)

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PLEASE COMPLETE YOUR ADDRESS AS MENTIONED IN YOUR OFFICIALLY VALID DOCUMENT (OVD)

NREGA **Aadhaar** **Passport** **Driving Licence** **Voter ID** **NPR**
Line 1

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Line 2

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City

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State

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Landmark (if any)

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Pin Code

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CURRENT ADDRESS

Same as above or Deemed OVD* (Select any 1 document) This is my Residence Place of work
 Utility Bill Property or Municipal Tax Receipt Letter of Allotment/Leave and Licence Agreement Letter issued by Foreign Embassy

Deemed OVD Number

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Line 1

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Line 2

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City

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State

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Landmark (if any)

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Pin Code

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I/We shall submit Officially valid document with the update current address within a period of three months of submitting the document above.

HOW WOULD YOU LIKE US TO REACH YOU?

Mobile No. (91)

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Landline No. (91)

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 (STD Code)

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 (Number)

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E - Mail ID

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(Fill in CAPITAL LETTERS)

*List of Deemed OVD is mentioned in Bank use section.

#issued by Government Departments, statutory or regulatory bodies, Public sector undertakings, scheduled commercial banks, Financial institutions and listed companies

TELL US WHAT YOU DO FOR A LIVING

1. Occupation (Select anyone)

1 a) Salaried (Select anyone) Public Private Government

Corporate Name

1 b) Self Employed Professional Doctor C.A. Architect Lawyer Consultant Entertainment
 Alternate Medical Practitioner Beautician Others

1 c) Self Employed Business Sole Proprietorship Partnership/Company No. of years in business <= 5 years > 5 years

1 d) Any other Occupation Homemaker Retired Farmer Politician Student Minor

2) Source of Income Salary Business Professional Fees Investment Agriculture Family Wealth

3) Gross Annual Income (INR)

Please submit the GST annexure if you are registered or exempt under GST

4) Are you a PEP* or related to one? Yes No

*Definition: Politically Exposed Persons (PEPs) : Politically exposed persons are individuals who are or have been entrusted with prominent public functions in a country. Examples of PEPs include, but not limited to : (1) Heads of states or of Government (2) Senior Politicians (3) Senior Government/Judicial/Military officer (4) Senior Executives of state-owned corporation (5) Important political party officials (6) Senior Indian Diplomatic personnel posted outside the country.

The term PEP also includes the families and close associates of the PEPs mentioned above.

WHICH OF OUR PRODUCTS WOULD YOU LIKE?

Savings Salary Reimbursement Senior Current
 Truly One account BSBDA I/We hereby declare that we are not holding any BSBDA account in any other bank.

DEBIT CARD

Do you need a Debit Card Yes No

You may fill in how you would like your name to appear on your Debit Card (If different from the name on your account)

Salary Account Debit Card will be linked to the Reimbursement Account being opened
 To enable international usage on your debit card, please use Limit Management under Debit card section in Internet/Mobile Banking.

WOULD YOU LIKE TO CHOOSE A NOMINEE FOR THE ACCOUNT ?

(Nomination under section 45 ZA of the Banking Regulations Act, 1949 and Rule 2 (1) of the banking companies (Nomination) rule 1985 in respect to Bank Account) The Nominee of Guardian (if applicable) cannot be a holder on the account.

Yes, I want to nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the account may be returned by LAKHDATAR ASHRAY NIDHI LIMITED (Nidhi Company)

No, I do not wish to nominate anyone on my behalf at this moment. I understand the advantages of nomination and the consequences of not nominating anyone to my account

Customer ID (In case an existing account holder, don't fill address)

Nominee Name

Title First Name Middle Name Last Name

Nominee Address Same as primary account holder communication address or Update address as below

Relationship with Depositor Date of Birth

If the nominee is a Minor**, please complete this section. As the nominee is a minor on this date, I/We appoint:

Guardian Name

Title First Name Middle Name Last Name

Guardian Address

to receive the amount of deposits in the account on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee. (** Where 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)

Please mention the nominee name in the statement/advice/passbook

I/We do hereby declare what is stated above is true to the best of my knowledge and belief.

Date Place

SIGNATURE

Witness 1
(Required only if applicants use thumb impressions)

Witness 2
(Required only if applicants use thumb impressions)

NIDHI USE SECTION

*Mandatory

01. Payment Details

Amount Cash (Only at the Branch) Cashier's Signature _____ Employee ID _____
 Mode of IP Cheque NEFT RTGS Cheque Date

Cheque / NEFT / RTGS Details _____

Nidhi Name _____ Branch Name _____

02. Others Details

*Account Branch Code _____ *Account Branch Name _____ *Product Code _____
 Reimbursement Product Code _____ *Sourcing Branch Code _____ Sourcing Branch Name _____
 *Lead Generator _____ Lead Warmer _____ Lead Converter _____
 *Profit Center _____ Campaign Code _____ Corporate Code _____

Customer Employee ID (Applicable for salary accounts) _____

Staff Family Staff Customer ID Spouse Parent Child

03. Applicable for Insta Accounts

Customer ID Account No

04. Applicable for RM Program

Group ID Program Code RM Code

05. *Banker Certification

I have met the customer at: Residence or Place of work Other _____

I have seen and verified the original KYC documents. Copy/Photo taken for record. The customer has signed in my presence

Name _____ Certification Date
 Employee ID _____ Signature of Employee _____

RbiCrCatg	RbiCrCode	RbiDrCatg	RbiDrCode
180 Household, MFI, TASC	189 Resident Individuals	350 Non Infrastructure	383 Other Retail

06. *Checker confirmation by BM / SM / APM / ASM / CSR (Corp. Salary) / RM-BB (Rural Banking)

I have checked the form along with the supporting documents submitted by the customer and found the same to be acceptable as per the present KYC policy and relevant operating guidelines of the Nidhi.

Name _____ Employee ID _____ Designation _____
 Signature _____

Definition of related person under GST is an under:

- (a) Persons shall be deemed to be "related persons" if-
 1. Such persons are officers or directors of one another's businesses;
 2. Such persons are legally recognised partners in business;
 3. Such persons are employer and employee;
 4. Any person directly or indirectly owns, controls or holds twenty-five percent or more of the outstanding voting stock or shares of both of them;
 5. One of them directly or indirectly controls the other;
 6. Both of them are directly or indirectly controlled by a third person
 7. Together they directly or indirectly control a third person; or they are members of the same family;
- (b) The term "Person" also includes legal persons;
- © Person who are associated in the business of one another in that one is the sole agent or sole distributor or sole concessionaire, howsoever described of the other, Shall be deemed to be related.

Explanation I. - The term "person" also includes legal persons.

Explanation II. - Persons who are associated in the business of one another in that one is the sole agent or sole distributor or sole concessionaire, howsoever described, of the other, shall be deemed to be related.

Definition of Deemed OVD is as under:

- (a) Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill)
- (b) Property or Municipal tax receipt
- © Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments, or Public Sector Undertakings, if they contain the address
- (d) Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and license agreements with such employer allotting official accommodation
- (e) OVD presented by a foreign national does not contain the details of address, in such case the documents issued by the Government department of foreign jurisdictions and letter issued by the Foreign Embassy or Mission in India shall be accepted as proof of address

SWEEP OUT FACILITY

I/We wish to opt for Sweep Out Facility from the Senior Account being opened

- Sweep Out is a facility which provides liquidity of a Savings Account coupled with higher interest earnings of a Fixed Deposit (FD)
- Through Sweep Out facility, savings balance from the account is transferred automatically into a Fixed Deposit, at a specific threshold limit basis product offering
- Fixed deposits are formed for default tenure of 1 year 1 day only, at applicable interest rates
- Sweep In facility is enabled by default for all FDs book through Sweep Out
- The frequency of sweep out for deposit booking will be weekly subject to availability of balance and will start next day from when the sweep out is set

DECLARATION (Please read carefully and sign at the end of this section after you have filled in all the details in the form)

1. I wish to avail the banking facilities/products from LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY), LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) and other products/services including Mutual Funds and/or insurance products that are offered by LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) in its capacity as an Intermediary and I have read, understood and agree to the Terms and Conditions displayed on the website of LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) i.e. www.lakhdatarbank.com, w.r.t. the said banking facilities and other products/services which may be amended by LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) from time to time and hosted and notified on the website of LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY).
2. I/ have read, understood and agree to the charges/costs, mentioned in the extant Schedule of Charges pertains to the banking facilities and products as well as the facilities and/or the other products which I wished to avail. This Schedule of Charges is also displayed on www.lakhdatarbank.com.
3. I agree to abide by and be bound by all applicable rules/regulations/instruction/guidelines issued by the Reserve Bank of India, and under the FEMA regulations, 2000 governing EEFC Accounts, the Foreign Exchange Management Act, 1999 and Foreign Account Tax Compliance Act 2010 (to the extent applicable to India) and the Common Reporting Standards (CRS), in force from time to time. I have declared my status as per the rules applicable under section 285BA of the Income Tax Act, 1961 (the Act) as notified by Central Board of Direct Taxes (CBDT) in this regard.
4. I authorize LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) to conduct my credit history verification with CIBIL or any other credit rating agency and acknowledge that LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY). I declare that I have not availed any credit facility from any bank or have obtained NOC from such bank(s) for opening of a current account with LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY). I also hereby authorize LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) to retrieve my credit information report with help of accredited credit rating agencies and share the same with me directly as per bank's internal policy.
5. I agree to furnish and intimate to LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) any other particulars that I am called upon to provide on account of any change in law/statutory requirements either in India or abroad. I authorize LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) to exchange, share or part with all the customer information/KYC documents provided herein with financial institutions/agencies/statutory bodies/other such persons including but not limited to financial products/services providers e.g. Insurance companies, Asset Management Companies etc. for the services/products which I wished to avail and which whom LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) has agency/distribution/marketing/referral arrangement, as may be required by LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY). I shall not hold LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) or its agents/representatives liable for using/sharing such information.
6. I hereby declare that the information provided herein as well as in the documentary evidence provided by me LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) (the "Customer Information") is true, correct and complete in all aspects to the best of my knowledge and that I have not withheld any Customer Information that may affect the assessment/categorization of the account as a Reportable account or otherwise. I further agree that any false/misleading Customer Information given by me or suppression of any material fact will render my account liable for closure and the bank shall have the right to initiate any action, under law or otherwise.
7. If any of the information provided here is incorrect, I hereby agree to indemnify and keep indemnified LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY), affiliates and their successors or assignees.
8. I agree and understand that LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) reserves the right to reject my account opening application form/request and/or the request for availing the services/products without assigning any reason thereof and without being liable to me in any manner whatsoever.
9. I authorize LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) to submit applications/other relevant documents, debit my bank account and transfer funds in any form and manner for transactions in Mutual Funds/Other investment products or do any such incidental things in pursuance of the specific instructions given by me or my Attorney from time to time for the services and/or the products I wished to avail. I state that all the acts, deeds and things done by LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) based on such instructions shall be binding on me. I hereby agree and consent to avail other products/services including Mutual Funds and/or insurance products and further agree to absolutely abide by all the Terms and Conditions in respect thereof.
10. I, being the Sole Proprietor of the Sole Proprietorship Concern (as mentioned above) hereby agree and consent to avail the "Truly One Account" of LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) and further agree to absolutely abide by all the Terms and Conditions in respect thereof, as may be notified by LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) from time to time.
11. I hereby consent to receiving information from Central KYC Registry through SMS/Email on the registered number/email address shared with LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY).
12. I am fully aware that the bank sends SMS alerts on all account/card related transactions promptly on the mobile number shared at the time of account opening/updated subsequently and any failure to update contact information with the bank may result in any financial loss in case of misuse of cards.
13. All fees/charges to be paid shall be exclusive of goods and services tax (GST), as may be applicable. LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) will provide me/us Services Accounting Code (SAC) and this will be quoted in all our invoices/credit/debit notes. LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) will determine if I/We are related party based on documents available or submitted for this purpose. LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) will determine the location of service provided which shall be binding on me/us. I/We shall provide the Bank with the details of exemption or lower rate of tax, if any supported by relevant documents prior to availment of services. For smooth realization of input tax credit, I/We shall validate the invoices uploaded in the GSTN portal by the Bank between the 10th - 15th day of the month succeeding the relevant period. In case of any discrepancies, I/We shall bring it to the notice immediately. LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) will issue invoices on a monthly basis. The contents of all the invoices, debit notes, credit notes, etc. will be as per rules and guidelines in the GST law.
14. LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) protects the interest of its customers against any unauthorized electronic banking transaction. You may visit Bank's website www.lakhdatarbank.com for more details in respect of the same.
15. I understand, acknowledge and authorize that as per the provisions of Income Tax Act, Rules made thereunder and the guidelines issued by the Government/RBI in the matter, depending upon the residential status and/or other criteria stipulated therein, the Bank may have to report the details in respect of my account(s) as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the Inter-Governmental Agreements (IGA) in respect of Foreign Accounts Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) and/ or any other similar arrangements.
16. 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 become incorrect.
17. I agree to furnish any declaration/information that is called upon me by LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) in order to ascertain my compliance wrto tax return filings for the purposes of Section 194N of the Income tax Act, 1961 governing TDS on cash withdrawals in such form and manner as may be required by the Bank.
18. I also agree that our failure to disclose any material fact known to me now or in future, may invalidate my application and LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) 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.
19. I agree to furnish any particulars/information that is called upon me by LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) on account of any change in law either in India or abroad in the subject matter herein.
20. In the event there is any tax demand {including interest(if any)} raised due to nondisclosure / inaccurate disclosure of information/documents 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 proceeding before GOI/RBI/Income Tax Authorities.

Would you like LAKHDATAR ASHRAY NIDHI LIMITED (NIDHI COMPANY) or its representatives to contact you yes No and tell you about various products (including insurance), services and offers?

SIGNATURE

Name : _____

Date

D	D	M	M	Y	Y	Y	Y

Place : _____

Please paste a RECENT Colour photograph.
Please sign across the photograph

WITNESS 1

(Required only if applicants use thumb impressions)

WITNESS 2

(Required only if applicants use thumb impressions)