



MUFG Bank, Ltd.

Savings Account Opening Application Form



Account Opening Documentation:

We seek your understanding and cooperation in furnishing the documents required for account opening and value your time and effort in doing so. We request you to provide suitable documentation as indicated below which is required by the Bank under local laws and regulations and also to comply with KYC guidelines and policy as part of the global effort to combat money laundering, terrorist financing and fraudulent activity.

Important Note:

- ◆ Please fill the form in CAPITAL letters and tick wherever applicable.
- ◆ Avoid any sort of alterations/cutting in the Application form.
- ◆ Produce original documents for verification against each self attested photocopy by Account Holder(s).
- ◆ Please produce separate documents to evidence proof of identity and proof of address for confirming name, date of birth and current residential address for each account holder.
- ◆ Please avail of the nomination facility.
- ◆ Please attach separate sheets in case the given space is insufficient.

Account Opening Requirements:

1. Completed Account Opening Application Form along with required documentation.
2. Recent Passport size photographs of all the Account Holder(s) duly signed on front (not more than six months old).
3. PAN Card copy or Form 60 (whichever is applicable).

Documents to be submitted for Account Opening:

Identification Proof (List A)

- ◆ Passport
- ◆ Driving License
- ◆ PAN Card
- ◆ Voter ID Card
- ◆ Any Photo ID card issued by Central/State Govt./ PSU/Armed forces ID card

Address Proof (List B)

- ◆ Passport
- ◆ Voter ID Card
- ◆ Driving License
- ◆ Latest utility bill in the name of the applicant(s) i.e. electricity, water or telephone bill (not older than three months)
- ◆ FRRO, Visa copy / Appointment letter (applicable in case of foreign nationals only)
- ◆ Letter from the Embassy confirming residential address (applicable for Diplomats and other Embassy officials)

Special Instructions:

In case of joint account holder(s), acceptable documents which can be submitted as proofs for establishing relationship-

- ◆ Passport
- ◆ Driving License
- ◆ PAN Card
- ◆ Voter ID Card
- ◆ Photo-Ration Card

For ascertaining Minor's date of birth, acceptable documents which can be submitted-

- ◆ Birth certificate issued by Municipal Authority.
- ◆ Passport held in the name of the minor.
- ◆ 10th Class certificate indicating DOB, issued by the Central Board (C.B.S.E., I.C.S.E.) / State Board.

Note: 1. Bank may request for any further specific / additional documents as may be required.



12. Personal Details:

Educational Qualification Undergraduate Graduate Postgraduate
 Others (Please specify) _____

Marital Status Unmarried Married Others (Please specify) _____

Number of Dependents Adults Children

Annual Income (in INR) _____

13. Occupation Details:

Salaried Self-employed Business Retired
 Housewife Student Others (please specify) _____

In case of Salaried (Please provide Employer details, Designation, Job Profile and Nature of Work)

In case of Self-employed

Chartered Accountant / CPA Doctor Engineer
 Lawyer / Notary Consultant / Professional Other (please specify) _____

Please mention briefly nature of professional work undertaken

In case of Business

Manufacturing Retailer / Stockist
 Finance / Investment Wholesaler
 Export / Import Commission Agent / Broker
 Service Provider Lottery
 Trading Arms and Ammunition
 Antique Dealer Dealer in precious metals / stones
 Bar / Night Club / Casino Money exchanger
 Real Estate Agent Others (please specify) _____

Please mention briefly nature of business activities undertaken

Nature of Industry:

Engineering / Architectural Firm Food Products Power / Electricity
 IT Software / Hardware Gems / Jewellery Retailing
 Commodities Hotel / Restaurant Shipping
 Construction / Real Estate Chemicals Textile
 Electronic Goods Leather Timber
 Financial Services Metals Transport / Logistics
 Others (Please specify) _____

12. Personal Details:

Educational Qualification Undergraduate Graduate Postgraduate
 Others (Please specify) _____

Marital Status Unmarried Married Others (Please specify) _____

Number of Dependents Adults Children

Annual Income (in INR) _____

13. Occupation Details:

Salaried Self-employed Business Retired
 Housewife Student Others (please specify) _____

In case of Salaried (Please provide Employer details, Designation, Job Profile and Nature of Work)

In case of Self-employed

Chartered Accountant / CPA Doctor Engineer
 Lawyer / Notary Consultant / Professional Other (please specify) _____

Please mention briefly nature of professional work undertaken

In case of Business

Manufacturing Retailer / Stockist
 Finance / Investment Wholesaler
 Export / Import Commission Agent / Broker
 Service Provider Lottery
 Trading Arms and Ammunition
 Antique Dealer Dealer in precious metals / stones
 Bar / Night Club / Casino Money exchanger
 Real Estate Agent Others (please specify) _____

Please mention briefly nature of business activities undertaken

Nature of Industry:

Engineering / Architectural Firm Food Products Power / Electricity
 IT Software / Hardware Gems / Jewellery Retailing
 Commodities Hotel / Restaurant Shipping
 Construction / Real Estate Chemicals Textile
 Electronic Goods Leather Timber
 Financial Services Metals Transport / Logistics
 Others (Please specify) _____

12. Personal Details:

Educational Qualification Undergraduate Graduate Postgraduate
 Others (Please specify) _____

Marital Status Unmarried Married Others (Please specify) _____

Number of Dependents Adults Children

Annual Income (in INR) _____

13. Occupation Details:

Salaried Self-employed Business Retired
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In case of Salaried (Please provide Employer details, Designation, Job Profile and Nature of Work)

In case of Self-employed

Chartered Accountant / CPA Doctor Engineer
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Please mention briefly nature of professional work undertaken

In case of Business

Manufacturing Retailer / Stockist
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 Service Provider Lottery
 Trading Arms and Ammunition
 Antique Dealer Dealer in precious metals / stones
 Bar / Night Club / Casino Money exchanger
 Real Estate Agent Others (please specify) _____

Please mention briefly nature of business activities undertaken

Nature of Industry:

Engineering / Architectural Firm Food Products Power / Electricity
 IT Software / Hardware Gems / Jewellery Retailing
 Commodities Hotel / Restaurant Shipping
 Construction / Real Estate Chemicals Textile
 Electronic Goods Leather Timber
 Financial Services Metals Transport / Logistics
 Others (Please specify) _____

14. Details of Account Holder(s):

PLEASE PASTE
SOLE / FIRST
APPLICANT'S
LATEST
PASSPORT SIZE
COLOURED
PHOTOGRAPH
SIGNED ACROSS

Sole / First Applicant's Details:

Name _____

Father's/Spouse's Name _____

Contact details:

Mobile _____ Tel (Home) _____

Fax _____ Tel (Office) _____

E-Mail ID _____

Specimen Signature

PLEASE PASTE
SECOND
APPLICANT'S
LATEST
PASSPORT SIZE
COLOURED
PHOTOGRAPH
SIGNED ACROSS

Second Applicant's Details:

Name _____

Father's/Spouse's Name _____

Contact details:

Mobile _____ Tel (Home) _____

Fax _____ Tel (Office) _____

E-Mail ID _____

Specimen Signature

PLEASE PASTE
THIRD
APPLICANT'S
LATEST
PASSPORT SIZE
COLOURED
PHOTOGRAPH
SIGNED ACROSS

Third Applicant's Details:

Name _____

Father's/Spouse's Name _____

Contact details:

Mobile _____ Tel (Home) _____

Fax _____ Tel (Office) _____

E-Mail ID _____

Specimen Signature

15. Mode of Account Operation:

- Singly
- Jointly
- Either or Survivor
- Former or Survivor
- Anyone or Survivor
- Power of Attorney
- Others (please specify details below under special instructions)

Special instructions: _____

16. Details of Accounts held with other Banks (Mandatory as per RBI guidelines):

Whether account(s) held by the applicant(s) with any other bank(s) Yes No

If Yes, please provide details of the account(s) maintained with other bank(s):

Name of the Bank	Branch Address	Type of Account	Account Number
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

17. Credit Facilities with other Banks:

I /We declare that I/we do not enjoy credit facilities with other bank(s)/any other branch of your bank and undertake to inform the bank in writing as soon as any credit facility is availed from any other Bank/ any other branch of your Bank.

I /We declare that I/we enjoy credit facilities with other bank(s)/ other branch (es) of your bank as per the following details:

S. No.	Nature of Credit Facility etc.	Amount sanctioned	Amount utilized as on date	Name of the Bank	Address of the Bank	Account No.

18. Initial Payment Details:

A. Funding details

Currency _____ Amount _____ (In words) _____

Cheque No. _____ Dated _____ Drawn on Bank _____

Branch _____ Account Number _____

Cheque should be crossed A/C Payee & drawn payable to "MUGB Bank, Ltd. A/C - Account Name" and should be from own account with other bank. Please ensure that signature(s) on funding cheque match with the specimen signature (s) provided to the bank.

B. Inward Remittance

Remitter _____ Address _____

Currency and Amount _____

Remitting Bank and Branch Address _____

19. Introducer Details:

Name of Introducing customer _____

Account number of the Introducer _____

I/We confirm that I/We maintain an account with MUFG Bank, Ltd. _____ Branch for over 12 months. I/We personally know the applicant(s) detailed in the Application form for more than 6 months and confirm his/her /their identity, occupation and address.

Signature of Introducer: _____

Date

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

Place _____

For Bank Use Only

Introducer's Signature Verified By:

20. Minor Declaration (In case of Minor, Please submit copies of identification and address document for the Guardian.):

I hereby declare that the date of birth of the minor who is my _____

is ____/____/____ and I am his/her natural and lawful Guardian / Guardian appointed by court order dated ____/____/____ (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I, indemnify the Bank against the claim of the above minor for any withdrawal/transactions made by me in his/her account. Upon attaining majority, I undertake to produce the minor at the Bank along with required documents for conversion of account status from minor to major and shall not operate the account further on behalf of the minor. I understand that the Bank may temporarily freeze operations in the account until the required formalities have been fulfilled by me/minor turned major.

Signature of Parent / Guardian _____

Date:

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

Name of Parent / Guardian _____

21. Senior Citizen Declaration:

I/We, hereby undertake and declare that I/we qualify as a Senior Citizen as per the prevailing rules and regulations. I/ We further state that the documents/statements/declarations furnished/made by me/us to MUFG Bank, Ltd., _____ Branch or as represented herein are true and correct. Further, in the event any of the documents/statements/declarations are found to be incorrect in material particular or otherwise, I/We hereby undertake to indemnify MUFG Bank, Ltd., _____ Branch for all times hereafter against all losses, costs, claims, actions, demands, risks, charges, expenses, damages etc., whatsoever which the Bank may suffer and/ or incur on account of the representations being made by me/us.

Signature of 1st Applicant

Signature of 2nd Applicant

Signature of 3rd Applicant

22. Nomination Form (Form DA1):

- Yes, I/We want to nominate the following person.
- No, I/We do not want to nominate anyone on my/our behalf.

Nomination under Section 45ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules, 1985, in respect of Bank Deposits.

I/We nominate the following person to whom in the event of my/our/minor's death the amount of the deposit/s in the account may be returned by MUFG Bank, Ltd. _____ Branch.

Nominee Name & Address: _____

Relationship with Depositor(s), if any: _____ Age: _____ years Date of Birth:

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

*As the nominee is a minor on this date, I/we appoint (Name & Address) _____

to receive the amount of the deposit/s in the account on the behalf of the nominee in the event of my/our/minor's death during the minority of the nominee. I/We do hereby declare that what is stated above is true to the best of my/our knowledge and belief.

Signature of Sole/First Applicant

Signature of Second Applicant

Signature of Third Applicant

Signature of Depositor(s)

Witness Name _____

Witness Name _____

Signature*** _____

Signature*** _____

Address _____

Address _____

Date

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

Date

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

Notes:

*Where the 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 ** Strike out if not a minor ***Thumb impressions must be attested by two witnesses.

Any variation in or cancellation of the nomination shall be in the prescribed form under the signatures of the Depositor and if more than one, then under the joint signatures of all the Depositors and/or the Survivors of them as the case may be.

The Bank recommends that all depositors avail the nomination facility. The nominee, in the event of death of the depositor/s would receive the balance outstanding in the account as a trustee of legal affairs, thus helping in quick and easy settlement.

23. Indication of Nominee name:

- I/ We hereby request the Bank to indicate the Nominee's name on the statement of account.
- I/ We hereby request the Bank not to indicate the Nominee's name on the statement of account.

Signature(s) / Thumb Impression of Account Holder(s)

Know Your Customer (KYC) Details:

	Document submitted for Proof of Identity / Address	Document Identification No. (If any)	Place of Issue	Date of Issue	Date of Expiry
First Applicant					
Second Applicant					
Third Applicant					

1. Purpose of Account Opening:

- Salary
 Loan Repayment
 Business
 Basic Household Expenses
 Investment
 Others (please specify) _____

2. Expected Source of Funds:

- Salary Receipts
 Rental Income
 Business Income
 Interest / Dividend Income
 Income from Investments
 Inheritance
 Consultation / Professional Fees
 Others (please specify) _____
 Savings

3. Expected Account Turnover (INR): _____ **4. Expected Number of Transactions per year:** _____

5. Expected Account Activity:

Product / Service	Total Amount in a month (INR)	Frequency in a month	Country of Remittance	Purpose
Cash Withdrawals-INR				
Cash Withdrawals-Foreign Currency				
Cash Deposits-INR				
Cash Deposits-Foreign Currency				
Traveller Cheques-Purchase & Sale				
DDs/ Pay Orders/ Cheques Issued in Clearing				
Cheque Deposits-Local/ Outstation				
Cheque Deposits-Foreign Currency				
RTGS/ NEFT/ ECS-Outward				
RTGS/ NEFT/ ECS-Inward				
Foreign Wire Transfer-Outward				
Foreign Wire Transfer-Inward				
Any Other Services				

6. Whether existing account holder

Yes No If yes, Customer ID _____ Account Number _____

7. Whether Letter of Authority/Power of Attorney given to another person Yes No

If yes, please provide POA Holder's name _____ Date of Birth

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

Address _____ Identification document _____
(for confirmation of name, date of birth and address)

Ultimate Beneficial Owner (UBO)

Whether carrying out transactions for a client: Yes No

If Yes, please specify the relation and also fill the UBO details below:

(UBO here refers that you are maintaining or propose to maintain the account for the benefit of other person)

- Acting as formation agent of legal person(s)
- Acting as (or arranging for another person to act as) a Director or Secretary of a Company.
- Acting as (or arranging for another person to act as) a Partner of a Partnership.
- Acting as (or arranging for another person to act as) a Trustee of an Express Trust.
- Acting as (or arranging for another person to act as) a nominee shareholder of another person.
- Any Other (Please Specify) _____

Ultimate Beneficial Owner (UBO) Form

1. Full Legal Name of the Customer: _____

2. Number of Ultimate Beneficial Owners: _____

3. Details of Ultimate Beneficial Owners (please submit respective identification proof):

Name	Address	Date of Birth

Declaration (for NRE / NRO Accounts only)

- I/We hereby declare that I am / we are non-resident Indian(s) of Indian origin.
- The second / third applicant(s) is/are non-resident Indian(s) of Indian origin.
- The second / third applicant(s) is/are resident in India and is/are close relative(s) of the first applicant.
- I/We undertake that I/we shall not make available to any person(s) resident in India foreign currency against reimbursement in Rupees or in any other manner in India.
- In case of debits to the account for the purpose of investment in India and credits representing sale proceeds of investment, I/we shall ensure that such investment / disinvestment would be covered either by general or special permission of the Reserve Bank of India.
- I/We hereby undertake to intimate the Bank about my/our return to India immediately on my/our coming to India for permanent residence.

Signature of: _____ _____ _____
 Sole / First Applicant Second Applicant Third Applicant

Passport Number: _____ _____ _____

Place of Issue: _____ _____ _____

Date of Issue: _____ _____ _____

Date of Expiry: _____ _____ _____

Foreign Exchange Management Act, 1999 (FEMA)

I/We hereby declare that the transactions relating to foreign exchange routed through your Bank do not involve, and are not designed for the purpose of any contravention or evasion of the provisions of the aforesaid Act or of any rule, regulation, direction, or order made here under. I/We also hereby agree and undertake to give such information/documents as will reasonably satisfy you about the transactions in terms of the above declaration.

Authority For Collection of Cheque/Drafts/Documents

I/We may have occasion from time-to-time to hand over to you for collection or negotiation Cheques, Drafts or Bills of Exchange (with or without documents attached) and I/we hereby agree to your forwarding the same to your agents for the time being for collection or negotiation. In the event of your having no independent collecting agent at any centre, I/ we hereby authorize you to send cheques, drafts, etc. by mail directly to the drawee bank itself.

I/We agree and undertake to hold you harmless, free from any responsibility and indemnified for any loss suffered by you in handling this business or transactions due to any cause whatsoever including delay in transit presentation, payment or default by your agent.

In addition to your ordinary rights as holder of such Cheques, Drafts or Bill of Exchange, you are authorized to accept in payment thereof a banker's cheque or banker's cheques payable at your station or at other places and in the event of such cheque(s) not being paid on presentation to debit the amount to our account with all charges incurred thereon. I/We confirm that you can present Bills and receive the amount in respect thereof in accordance with the usage of the place where the Bills are made payable. It is understood that these transactions are in all respects at my/our entire risk and responsibility.

Customer Declaration

I/We hereby acknowledge that I/we have received, read and understood the Bank's prevailing Terms, Conditions and Rules Governing Deposit Account and Schedule of Fees and Charges relating to the above account being opened by me/ us.

I/We agree to abide by the same as amended from time-to-time and further agree to abide by any additional terms and conditions governing any facilities, products and/or services offered by the Bank as I/we may apply for and/or utilize from time to time.

I/We agree to abide by the rules/provisions as prescribed by the Reserve Bank of India from time-to-time.

I/We hereby confirm having opted/chosen to get Statement of Account monthly/periodically issued by the Bank pertaining to the Account to be opened pursuant to this Application.

I/We also confirm not to commence or undertake any activity/transaction which is not permissible under the prevalent Foreign Direct Investment Policy or any other applicable Policy or guidelines of the Government of India/Reserve Bank of India save and except after obtaining specific prior approval from the concerned authorities under advice to the Bank.

I/We hereby confirm and declare that in relation to any Transaction, Dealing(s), Credit including advise or confirmation of the same, the obligations of the Bank shall be subject to the condition that the terms thereof including any document or drafts do not contain state or mention, including without limitation:

- (i) Any countries, organizations, entities, or individuals (under any law) relating to any sanction parties listed under United Nation, European Union, United States of America, Japan, India and other authorities;
- (ii) Any goods of origin from sanction countries listed under United Nation, European Union, United States of America, Japan, India and other authorities;
- (iii) Any prohibited goods under the list of United Nation, European Union, United States of America, Japan, India and other authorities;
- (iv) Any place or loading, place of discharge, or place of transshipment under the list of United Nation, European Union, United States of America, Japan, India and other authorities; and/or
- (v) Any vessel or carrier relating to any sanction parties listed under United Nation, European Union, United States of America, Japan, India and other authorities.

I/We shall maintain the minimum balance requirement as applicable at all times and the Bank shall levy prescribed charges in case of non-maintenance of minimum balance. In case of change of mailing address and other contact details, the same shall be communicated to the Bank in writing.

It is understood that the above account will be opened on the basis of the statements, declarations made by me/us and I/We represent that the information provided by me/us in this application form and in any other document(s) provided by me/us to the Bank is true, accurate and complete.

I/We acknowledge that the Bank may decline my/our application without providing any reason in which event no contractual relationship will arise between the Bank and me/us.

Signature of Account Holder(s)

For Bank use only

1. Customer Name : _____	8. Customer Country : _____
_____	9. H.O. Country : _____
2. Short Name : _____	10. Residence : _____
3. Sorting Index : _____	11. Industry : _____
4. Legal Address : _____	12. Sovereign / Private : _____
_____	13. H.O./ Branch : _____
5. Mail Address : _____	14. BIS Character : _____
_____	15. Competent Division: _____
6. Postal Code : _____	16. CIF List Cycle : _____
7. Japanese/ Non Japanese : _____	17. CPA List : _____
	18. W/H Tax : _____
	19. I/D 1 : _____
	20. I/D 2 : _____
	21. Local Option 1 : _____
	22. Local Option 2 : _____
	23. Local Option 3 : _____
	24. Optional Inquiry 2 : _____
	25. Optional Inquiry 3 : _____

Staff Confirmation for Account Opening:-

I, _____, an employee of MUFG Bank, Ltd. _____ Branch, India and working as _____, confirm that I have met in person Mr./ Ms. _____ of _____ (Name of Customer Company/ Firm/ Entity).

I have provided the customer a copy of the Terms & Conditions, Schedule of Fees & Charges and obtained duly filled in Current Account Opening Application Form along with the required documents from the customer.

Signature of Account Officer _____ Name _____ Date _____

Recommended for Account Opening (CBD/CFD/Deposits):

Account Officer/RM	Manager/Sr. Manager	AGM	DGM
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Checked by: Officer	Approved by (Operations): Senior Manager		DGM
<input type="text"/>	<input type="text"/>	AGM	<input type="text"/>

Compliance Check done:

Manager	Senior Manager	CO/ CCO
<input type="text"/>	<input type="text"/>	<input type="text"/>

Annexure 1
FORM NO. 60
[See second proviso to rule 114 B]

1.	First Name													2.	Date of Birth/Incorporation of declarant							
	Middle Name														D	D	M	M	Y	Y	Y	Y
	Surname																					
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 No.										
16.	Amount of transaction (Rs.):																					
17.	Date of transaction			D	D	M	M	Y	Y	Y	Y	18.	In case of transaction in joint names, number of persons involved in the 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, 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 transaction is held																					
a.	Agricultural income (Rs.):																					
b.	Other than agricultural income (Rs.):																					
23.	Details of document being produced in support of identify in Column 1 (Refer Instruction overleaf)			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 Instruction overleaf)			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:

1. 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: INCOME-TAX RULES, 1962

(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.

2. 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
A	For Individuals and HUF			
1.	AADHAR card	01	YES	YES
2.	Bank/Post office passbook bearing photograph of the person	02	YES	YES
3.	Elector's photo identity card	03	YES	YES
4.	Ration/Public Distribution System card bearing photograph of the person	04	YES	YES
5.	Driving License	05	YES	YES
6.	Passport	06	YES	YES
7.	Pensioner Photo card	07	YES	YES
8.	National Rural Employment Guarantee Scheme (NREGS) Job card	08	YES	YES
9.	Caste or Domicile certificate bearing photo of the person	09	YES	YES
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
11.	Certificate from employer as per annexure B prescribed in Form 49A	11	YES	YES
12.	Kisan passbook bearing photo	12	YES	NO
13.	Arm's license	13	YES	NO
14.	Central Government Health Scheme /Ex-servicemen Contributory Health Scheme card	14	YES	NO
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
20.	Bank Account Statement (Not more than 3 months old)	20	NO	YES
21.	Credit Card statement (Not more than 3 months old)	21	NO	YES
22.	Depository Account Statement (Not more than 3 months old)	22	NO	YES
23.	Property registration document	23	NO	YES
24.	Allotment letter of accommodation from Government	24	NO	YES
25.	Passport of spouse bearing name of the person	25	NO	YES
26.	Property tax payment receipt (Not more than one year old)	26	NO	YES
B	For Association of persons (Trusts)			
	Copy of trust deed or copy of certificate of registration issued by Charity Commissioner	27	YES	YES
C	For Association of persons (other than Trusts) or Body of Individuals or Local authority or Artificial Juridical Person)			
	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

(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.

(3) For HUF any document in the name of Karta of HUF is required.

(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. 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.

Annexure 2 - Cheque Book Requisition

Date _____

The Manager,
MUGB Bank, Ltd.

Dear Sir/Madam,

Please issue me/us a cheque book for my/our new savings account opened with the Bank.

Savings (Rupee Account) Savings (Dollar Account) Savings (Euro Account)

Please deliver the cheque book to me / us.

Please deliver the cheque book to the bearer whose signatures are attested below.

Bearer's Signature _____

Name of the Bearer _____

Signature of Account holder(s) _____

Please note: In case the cheque book is not collected within a period of 15 days, the Bank reserves the right to dispatch the same at the correspondence address and debit the delivery charges to the account.

I/We authorize the Bank to courier the cheque book at the correspondence address and debit the delivery charges to my / our Account.

Signature of Account holder(s)

Account Name _____

For Bank Use only

Currency _____

Account Number _____





NEEMRANA BRANCH : G-47, RIICO Industrail Area, Neemrana, District Alwar, Rajasthan - 301 705 Tel.: 91-1494-670 800

NEW DELHI BRANCH : 5th Floor, Worldmark - 2, Asset 8, Aerocity, New Delhi - 110 037 Tel.: 91-11-4100 3456

MUMBAI BRANCH : 15th Floor, Hoechst House, 193 Vinay K. Shah Marg, (Backbay Reclamation) Nariman Point, Mumbai - 400 021 Tel.: 91-22-6669 3000

CHENNAI BRANCH : "Seshachalam Centre", 6th & 7th Floor, Door No.636/1, Anna Salai, Nandanam, Chennai - 600 035 Tel.: 91-44-4560 5800, 4560 5900

BANGALORE BRANCH: Unit No 701, 7th Floor, World Trade Center, Brigade Gateway Campus, 26/1, Dr. Rajkumar Road, Malleshwaram, Bangalore - 560 055 Tel.: 91-80-6758 0000