

# The Burdwan Central Co-operative Bank Ltd.

Regd. Head Office : G.T. ROAD , BURDWAN-713101

**KYC Details for Existing Customers (As per KYC Policy and Circulars)**  
(Please use CAPITAL LETTERS only)

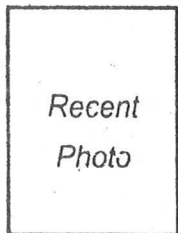
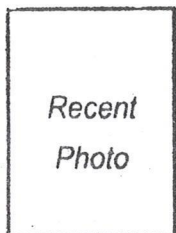
Branch :  Date :

Account No. :

**Account Holder 1                      Account Holder 2                      Account Holder 3**

Name : \_\_\_\_\_ Name : \_\_\_\_\_ Name : \_\_\_\_\_

S/D/W of : \_\_\_\_\_ S/D/W of : \_\_\_\_\_ S/D/W of : \_\_\_\_\_



Address with landmark : \_\_\_\_\_ Address with landmark : \_\_\_\_\_ Address with landmark : \_\_\_\_\_

Village : \_\_\_\_\_ Village : \_\_\_\_\_ Village : \_\_\_\_\_

Landmark : \_\_\_\_\_ Landmark : \_\_\_\_\_ Landmark : \_\_\_\_\_

P.O. \_\_\_\_\_ P.O. \_\_\_\_\_ P.O. \_\_\_\_\_

District : \_\_\_\_\_ District : \_\_\_\_\_ District : \_\_\_\_\_

PIN :  PIN :  PIN :

PAN :  PAN :  PAN :

Aadhaar:  Aadhaar:  Aadhaar:

Aadhaar:  Aadhaar:  Aadhaar:

Phone Number:  Phone Number:  Phone Number:

M  M  M

L  L  L

Date of Birth:  Date of Birth:  Date of Birth:

Date of Birth:  Date of Birth:  Date of Birth:

Gender: Male / Female Gender: Male / Female Gender: Male / Female

Gender: Male / Female Gender: Male / Female Gender: Male / Female

Proof of ID given (Self attested) Proof of ID given (Self attested) Proof of ID given (Self attested)

Proof of Address given (Self attested) Proof of Address given (Self attested) Proof of Address given (Self attested)

Proof of Address given (Self attested) Proof of Address given (Self attested) Proof of Address given (Self attested)

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I / We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue of misleading or misrepresenting. I/We am / are aware that I / We have held liable for it. I / We hereby authorise sharing of the information furnished on this form with all registered KYC Registration Agencies

\_\_\_\_\_  
Signature of Customer

Verified with Original

Place :

\_\_\_\_\_  
(Signature of Officer)

\_\_\_\_\_  
(Signature of BM / OC)

Date :