



CUSTOMER PROFILE FORM (CPF)

(For Individual)

(Branch to fill the Customer ID generated in the Utility)

Customer ID :

Date :

FILL ALL THE DETAILS IN CAPITAL LETTER WITH BLACK COLOUR INK ONLY.

(A) Individual Details: TYPE NEW UPDATE (Name to be displayed in Debit Card)

Prefix/Title: Mr. Mrs. Ms. Display Name:

First Name:

Middle Name:

Last Name:

Mobile No.: Landline with STD Code:

Date of Birth : PAN No.: Declaration Form: 60 61

Place of Birth: Country of Birth: Resident NRI Foreign National

Email ID :

(B) Present / Mailing Address : (Proof of address should be submitted)

Address Line 1 :

Address Line 2 :

Address Line 3 :

City: Country:

State: Pin/Zip:

(C) Permanent Address : (Proof of address should be submitted) If the address is different from the address mentioned above in Column (B)

Address Line 1 :

Address Line 2 :

Address Line 3 :

City: Country:

State: Pin/Zip:

(D) KYC Documents :

Identity/Address Proof Voter ID Pan Card Aadhaar Passport Driving License Job Card Issued by MNREGA ID Card issued by Govt. Authorities SPECIFY OTHERS

Document Number : Expiry Date (if any) :

Address Proof EB Bill Tel. Bill Ration Card Bank Statement Rent Agreement IT Assessment Order (Latest) SPECIFY OTHERS

Document Number : Expiry Date (if any) :

LVB CPF-01 (OCT 2015)

(E) Photograph and Signature :

Please do not staple or pin photo

Photograph should be signed at the bottom by the applicant

(Please sign using BLACK INK inside the box)

1.

2.

Witness Signature with Name (in case of LTI)

English Non -English LTI PA with Stamp Others

(F) For Branch Office Use :

Declared Annual Income : (₹ in lacs)

RISK LEVEL : LOW MEDIUM HIGH

Threshold Limit : ₹

Self attested photocopies of the supportive documents obtained and originals verified by the undersigned and found correct. Customer signed before the marketing executive/ the undersigned. Recommended to create Customer ID and open account with us.

Name of the BM / OIC :

Staff Number: P.A No :

Signature of BM / Officer-in-Charge with DATE

(G) Personal Details:

Gender :	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Transgender	<input type="text" value="SPECIFY OTHERS"/>	
Marital Status:	<input type="checkbox"/> Single	<input type="checkbox"/> Married	Nationality: <input type="checkbox"/> Indian	<input type="text" value="SPECIFY OTHERS"/>	
Religion/Ethnic Origin:	<input type="checkbox"/> Hindu	<input type="checkbox"/> Muslim	<input type="checkbox"/> Christian	<input type="checkbox"/> Jain	<input type="text" value="SPECIFY OTHERS"/>
Caste category:	<input type="checkbox"/> General / Other	<input type="checkbox"/> BC	<input type="checkbox"/> MBC	<input type="checkbox"/> SC / ST	<input type="text" value="SPECIFY OTHERS"/>
Father Name:	<input type="text"/>				
Mother Name:	<input type="text"/>				
Spouse Name:	<input type="text"/>				
Spouse Occupation:	<input type="text"/>	Spouse Income p.a.	<input type="text"/>		
No. of Children:	<input type="text"/>	No. of Dependents:	<input type="text"/>		

(H) Other Details:

Education:	<input type="checkbox"/> Below SSC	<input type="checkbox"/> SSC	<input type="checkbox"/> HSC	<input type="checkbox"/> Graduate	<input type="checkbox"/> Masters	<input type="checkbox"/> Professionals
Occupation / Profession:	<input type="checkbox"/> Salaried	<input type="checkbox"/> Business	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Home Maker	<input type="checkbox"/> Student
	<input type="checkbox"/> Doctor	<input type="checkbox"/> C.A	<input type="checkbox"/> Engineer	<input type="checkbox"/> Architect	<input type="checkbox"/> Lawyer	<input type="checkbox"/> Bank
	<input type="checkbox"/> Consultant	<input type="checkbox"/> Software / IT	Specify Others : <input type="text"/>			
Type of Business :	<input type="text"/>			Firm/ Company Name:	<input type="text"/>	
Employment Details:	<input type="checkbox"/> Public Ltd.	<input type="checkbox"/> Private Ltd	<input type="checkbox"/> Government	<input type="checkbox"/> Multinational	<input type="text" value="SPECIFY OTHERS"/>	
Grade/Position:	<input type="checkbox"/> Junior Mgmt.	<input type="checkbox"/> Middle Mgmt.	<input type="checkbox"/> Senior Mgmt.	<input type="text" value="SPECIFY OTHERS"/>		Years of Service: <input type="text"/>
Employer / Firm Name:	<input type="text"/>		Employer / Firm Address:	<input type="text"/>		
Annual Income (₹ In Lakhs):	₹ <input type="text"/>	Any Other Information <input type="text"/>				
Residence:	<input type="checkbox"/> Rented	<input type="checkbox"/> Owned	<input type="checkbox"/> Company	<input type="checkbox"/> Ancestral	If Staff in LVB, mention Staff No. : <input type="text"/>	

(I) Guardian Details (Submit separate CPF for Guardian):

Guardian Name:	<input type="text"/>	Relationship:	<input type="text"/>
Guardian Address:	<input type="text"/>		

I declare that I shall represent MINOR account holder and future transactions of any description. I shall indemnify the Bank against the claim of the MINOR for any withdrawal/transactions made by me in his/her account. I also declare that the amount of money withdrawn from this account is for the benefit of the minor.

Guardian type:

 Natural Legal
(J) Form 60 or Form 61 (If PAN is not submitted)

To be filled up by those who do not have either PAN/GIR (select appropriate form)

Form 60:

Are you assessed to tax? Yes/No
 If yes, Details of Ward/Circle/Range where the last return of Income was filed?
 Reasons for not having Permanent Account Number/General Index Register Number

Form 61:

I hereby declare that I am having agricultural income and I am not required to pay income-tax on any other income, if any.

(K) Declaration / Consent

I hereby certify that the information provided in this form is true and correct to the best of my knowledge. I also undertake to inform any changes in future, in respect of any of the information furnished. In the event of change in address due to relocation or any other reason, I will intimate the new address to the bank within two weeks of such a change.

FATCA/CRS: In the event of any statutory/regulatory obligations including the agreements like FATCA, I/We authorise the bank to disclose the details of my/our account/s to authorities concerned.



Signature of the Customer / Declarant / Guardian.

(L) For LOTUS - CPC Use :

CERSAI EKYC No. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(AML Verified) Signature with DATE	(KYC Verified by) Signature with DATE	(Data Verified by) Signature with DATE	(Audited by) Signature with DATE