

Offices at: 87 Gresham Street, London EC2V 7NQ  
90 South Road, Southall, Middx UB1 1RD

## Section I

	Applicant	Second Applicant
Title	<input type="text"/>	<input type="text"/>
First Name	<input type="text"/>	<input type="text"/>
Middle Name	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Current Address	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
Post Code	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Country	<input type="text"/>	<input type="text"/>
Residing Since	<input type="text"/> DD <input type="text"/> MM <input type="text"/> YYYY	<input type="text"/> DD <input type="text"/> MM <input type="text"/> YYYY
Passport/DVLA No	<input type="text"/>	<input type="text"/>
Citizenship	<input type="text"/>	<input type="text"/>
Marital Status	<input type="text"/>	<input type="text"/>
Date of Birth	<input type="text"/>	<input type="text"/>
Residence Tele No	<input type="text"/>	<input type="text"/>
Mobile No	<input type="text"/>	<input type="text"/>
Residence Fax No	<input type="text"/>	<input type="text"/>
E-mail Address	<input type="text"/>	<input type="text"/>
Previous Address (only if less than 3 years at current address)	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
Post Code	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Country	<input type="text"/>	<input type="text"/>
Residing Since	<input type="text"/> DD <input type="text"/> MM <input type="text"/> YYYY	<input type="text"/> DD <input type="text"/> MM <input type="text"/> YYYY
Mailing Address (only if different from current address)	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
Post Code	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Country	<input type="text"/>	<input type="text"/>

**Purpose of Opening the Account**

Day-to-day personal transactions  
Salary and Payments, Standing Orders & Direct debits  
Savings and Investments  
Other (give details)

**Account to be opened**

Current   
 Savings   
 Fixed Deposit   
Other (give details)

**Requirements**

Currency of the Account GBP  USD  EUR   
Issue cheque book for use on the above account Yes  No   
Issue Debit cum ATM card Yes  No   
Access to Internet Banking Yes  No   
Statement frequency Weekly  Fortnightly  Monthly  Quarterly  Half yearly  Yearly

**Employment Details**

**First Applicant**

Self Employed  Employed Full Time   
Employed Part Time  Student   
Homemaker  Unemployed   
Pensioner  Other (specify)

**Second Applicant**

Self Employed  Employed Full Time   
Employed Part Time  Student   
Homemaker  Unemployed   
Pensioner  Other (specify)

Nature of Employment/Business  
Employer's name  
Address line 1  
Address line 2  
Address line 3 Post Code

Nature of Employment/Business  
Employer's name  
Address line 1  
Address line 2  
Address line 3 Post Code

Period of Employment MM YYYY

Period of Employment MM YYYY

Work telephone No

Work telephone No

Total Gross income  Dependants

Total Gross income  Dependants

**Section 3**

**Additional information regarding Account with PNB in India (optional)**

Do you have an Account with PNB in India Yes  No

If Yes, Type of Account  Account No

Account in the Name of

Name of the Branch

Do you have an Account with an other Ba Yes  No

Name of the Bank

Residential property  Own  Rented  Staying with parents  Other (specify)

**Section 4**

Account will be operated by (Applicable to joint account only) (strike out all which are not applicable)

Either or Survivors  Jointly by Two

Section 5

Not ordinarily Resident Account holders

Is/are the account holder/s not ordinarily resident in the UK?

Yes

No

If Yes please complete the following section

I/We declare that I/we am/are permanently resident in

NAME OF  
COUNTRY

for UK Income tax

purposes and that my/our permanent address is as stated in Section 1 above.

I/We undertake to inform the bank immediately any change in my/our *Not Ordinarily Resident* status.

First Applicant		Second Applicant	
SIGNATURE	DATE	SIGNATURE	DATE
Third Applicant		Fourth Applicant	
SIGNATURE	DATE	SIGNATURE	DATE

## Section 6 Joint Account instructions

Is the account a joint account?

Yes  No

If yes, can any of the above operate the account singly?

Yes  No

If yes, review and sign the following section.

We, the undersigned, request you to open an account or accounts in our joint names, or to continue the joint account already opened.

We authorise you, until you receive notice in written form from any of us to the contrary:

(1) To pay and debit to any such account all cheques, orders to pay, bills of exchange, and promissory notes drawn, signed and accepted or made by anyone of us, whether the account(s) be in credit or overdrawn or shall become overdrawn by reason of such payments or debits.

(2) To grant at the request of anyone of us, overdraft, loan or other credit facilities or accommodation to us or to any third person and by way of security therefore, to accept as duly signed or executed on behalf of all of us any document creating or evidencing any charge, mortgage or pledge over or in respect of any securities, deeds or other articles in our joint names.

(3) To pay against the signature of anyone of us, any moneys held in credit of any deposit account in our joint names.

(4) To deliver against the signature of anyone of us, any securities, deeds or other articles held in our joint names by way of security or for safe custody or otherwise. We agree that, in the event of the death of any of us, you are to pay or deliver to or to the order of the survivor or survivors of us, all moneys, securities, deeds and other articles standing to the credit of or held for any account in our joint names. We hereby agree that we shall be jointly and severally responsible for any overdraft, loan or other credit facilities or accommodation which shall be granted in our joint names or for our joint account, together with all interest, commission and other banking charges and expenses.

(5) To open any new account in the above names in which case all instructions contained in this application form will apply for the new accounts to be opened.

### First Applicant

### Second Applicant

SIGNATURE	DATE	SIGNATURE	DATE
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One statement of account will be received by all account holders jointly. Account holders not to receive separate statement of account should sign this dispensation notice.

NAME OF THE ACCOUNT HOLDER	SIGNATURE	DATE
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## Section 6 General Agreement

I/We hereby request the Bank to open the account in the above names and information. I/We hereby declare that the above information is true and correct to the best of my/our knowledge. We understand that the account will be opened on the basis of the information provided by me/us. I/We hereby agree that any new account opened immediately or on a future date will be subject to the same terms and conditions as contained in this application form.

I/We undertake that I/we will not claim any interest on any of our Term deposit/s made from time to time after the maturity date unless and until we have made a specific request to renew the deposit. Notwithstanding this I/we hereby authorise Punjab National Bank (International) Ltd to renew the term deposit/s made from time to time, on maturity for an identical period in the absence of any specific notice to the contrary.

I/We agree to comply with the Bank's rules with regard to the conduct of the accounts. I/We understand that the information I/we have given may be used to offer other services from the Punjab National Bank (International) Ltd. In this connection contact may be made to me/us personally or by direct marketing means.

I/We resolve to provide to the Bank in writing any changes in personal details or circumstances that may change from time to time.

I/We acknowledge that the issue and usage of the debit cum ATM card ("the card") is governed by the terms and conditions in force from time to time and agree to be bound by the same. I/We accept that the terms and conditions are liable to be amended by Punjab National Bank (International) Ltd from time to time. In case we do not agree to any of the modified terms and conditions we will surrender the debit cum ATM card to Punjab National Bank (International) Ltd. I/We further unconditionally and irrevocably authorise Punjab National Bank (International) Ltd to debit my/our account to the amount drawn under the card and for the fees and charges for the use of the card.

I/We undertake to abide by the rules governing the usage of Internet and Telephone banking and also undertake to ratify and confirm all that the user/s do/es or cause/s to do through these facilities. This undertaking should continue to be valid until and unless I/We revoke it by written notice to you.

I/We choose NOT to be contacted by Punjab National bank (International) Limited for marketing purposes by ticking this box.

Under the Data Protection Act 1998, there are restrictions placed on data processors (PNBIL) regarding the transfer of data outside the EU. The data provided by me/us or already in the Bank's records will be provided to Back Office (part of PNBIL) in India for processing and may be communicated to the Bank's corporate office in India, who may, for regulatory or statistical purposes, provide information to the Indian Regulatory Authorities. Information may be used for credit search. I/We understand that no information will be disclosed outside the Bank. The Bank will disclose the information it holds if the Bank is allowed by law, if I/we give permission/authority to the bank, if it is in bank's interest or if there is a public duty to do so. I/We have the right to request the data held about me/us.

By signing below I/we have understood this General Agreement and consenting the Bank to process data for the purpose stated, including sending the data to the Bank's Back Office/Corporate office in India.

I/We hereby declare that I/we have read the booklet on general terms and conditions and agree to abide by them.

NAME OF THE ACCOUNT HOLDER 1	SIGNATURE	DATE
NAME OF THE ACCOUNT HOLDER 2	SIGNATURE	DATE

# For Internal Use Only

## CHECK LIST

Validation	1 <sup>st</sup> Applicant	2nd Applicant
Identity	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Address	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Credit agency check	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Telephone	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Employment details	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Signature	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Bank reference	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Mode of account operation taken	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

CUSTOMER ID																	
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ACCOUNT NO																	
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ACCOUNT OPENED BY

NAME OF THE OFFICER	SIGNATURE
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ACCOUNT VERIFIED BY

NAME OF THE OFFICER	SIGNATURE
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THE CUSTOMER HEARD ABOUT PNBIL FROM FOLLOWING SOURCE:

LEAFLET	<input type="checkbox"/>
LETTER FROM PNBIL	<input type="checkbox"/>
RECOMMENDATION FROM ANOTHER CUSTOMER (NAME)	<input type="checkbox"/>
RADIO (WHICH)	<input type="checkbox"/>
CONTACT OF STAFF	<input type="checkbox"/>
PNB	<input type="checkbox"/>
OTHER (SPECIFY)	<input type="checkbox"/>