

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"/>
Home Tele No	<input type="text"/>	<input type="text"/>
Mobile No	<input type="text"/>	<input type="text"/>
Home Fax No	<input type="text"/>	<input type="text"/>
E-mail Address	<input type="text"/>	<input type="text"/>
Previous Address <small>(only if less than 3 years at current address)</small>	<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 <small>(only if different from current address)</small>	<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"/>

Section 3

Additional information regarding other Accounts.

Do you have an Account with an other Bank 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 Any Other, please specify

Section 5

Not ordinary holder/s not ordinary resident in the UK? Yes No

If yes please complete the following section

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

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 agree that each applicant together and separately shall be 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. This means that if one of you is unable to repay the money owing, the other account holder(s) can be required to pay the amount in full.

(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	DATE
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Section 6 General Agreement

I/We request the Punjab National Bank (International) Limited (the "Bank") to open the account in the above names and information. I/We declare that the above information is true and correct to the best of my/our knowledge. I/We understand that the account will be opened on the basis of the information provided by me/us. I/We agree that any new account opened immediately or on a future date will be subject to the Bank's Terms and Conditions (a copy of which has been provided) and as amended from time to time.

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 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/ATM card (the "Card") is governed by the Bank's Terms and Conditions (a copy of which has been provided) and as amended from time to time. In the event that I/we do not agree to any of the modified terms and conditions I/we will surrender the debit/ATM card to the Bank and shall cut into and through the magnetic strip. I/We authorise the Bank 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 abide by the rules governing the usage of the Bank's 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 (Punjab National Bank (International) Limited) regarding the transfer of data outside the EEA. The data provided by me/us or already in the Bank's records will be provided to Back Office (part of the Bank) 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 the Bank's interest means that it must give the information (for example, to prevent fraud) or if there is a public duty to do so. I/We have the right to request the data held about me/us. The Bank may charge an administration fee to meet its costs of providing you with the data, [details of this fee are set out in the Tariff booklet].

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

I/We declare that I/we have read and understood the booklet on Bank's 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 st 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	
LETTER FROM PBBIL	
RECOMMENDATION FROM PNBIL CUSTOMER	NAME:
RADIO	WHICH:
CONTACT OF STAFF	NAME:
PNB	
OTHER SPECIFY	