## **Annexure-II**

## **Self Help Group - Savings Bank Account Opening Form**

To:

For Official Use Only	
SB A/c No	
Customer ID	
SHG Scheme Code	
(NRLM/Others)	
SHG Gender Code	
(Male/Female)	

The Branch Manager				
	Bank			
	Branch			

Sub: - Application for SHG-SB A/C opening

Dear Madam/Sir,

1. We request you to open a Savings Bank Account in name of our Self-Help Group. We agree to abide by the rules and regulation of the bank related to Savings Account.

Name of SHG							
Date of		Number	of		Name of Facilitating		
Formation		Members			Agency (	if any)	
Address	Street			١١	Village/ City		
	Gram Panchayat						
	Block						
	DistrictPin						

2. The Savings Account will be operated by joint signature of any two among the following representatives of our Self-Help Group. A copy of resolution taken by our Self-Help Group in this regard is attached.

3. Request for Cheque Book: Yes / No

Mobile:	Mobile:	Mobile:		
KYC Documents	KYC Documents Provided	KYC Documents Provided		
Provided				
Enclosed Copy of	Enclosed Copy of address	Enclosed Copy of address &		
address & ID proof	& ID proof	ID proof		
Voter ID	Voter ID Driving	Voter ID Driving		
Driving license	license	license		
Aadhar Card	Aadhar Card Job	Aadhar Card Job		
Job Card	Card	Card		
PAN Card	PAN Card	PAN Card		
Passport	Passport	Passport		
Any other	Any other document	Any other document		
document	accepted by Bank	accepted by		
accepted by	(specify)	Bank (specify)		
Bank				
(specify)				
Specimen	Specimen	Specimen Signature/Thumb		
Signature/Thumb	Signature/Thumb	Impression		
Impression	Impression			

4. We hereby declare that the above information is true and correct. We have agreed to the terms and conditions and also agree to abide by any amendments to the terms and conditions as may be stipulated by the Bank from time to time.

Yours faithfully,			
1	2	3.	
(Signature/Thumb I	mpression of SHG represe	entatives with Seal of SHG	)
Date:		Place:	
Enclosure:			

- i. Copy of Resolution by Self Help Group to open Savings Account.
- ii. Photographs of authorized representatives.

iii. Copy of ID and address proof of authorized representatives.

## For Bank Use Only

1.	The applicant has affixed his s presence	signatur	e or th	umb print, as	the ca	ase ma	y be, in my
2.	I have explained the	rules	1	regulations	to	the	applicant
	Account has been opened on _ Cheque Book has been issued.						
	Date:		Offic	cer			_