

**कल्लाप्पाणा आवाडे इचलकरंजी**  
**जनता सहकारी बँक लि. (मल्टीस्टेट शेड्युल्ड बँक)**



**Kallappanna Awade Ichalkaranji**  
**Janata Sah. Bank Ltd. (Multi State Scheduled Bank)**

हेड ऑफिस : जनता बँक भवन, इचलकरंजी-४१६ ११५,  
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**SAFE DEPOSIT LOCKER ACCOUNT OPENING FORM**

Branch : \_\_\_\_\_ Customer Id : \_\_\_\_\_

Locker Account No.: \_\_\_\_\_ Date: 

D	D	M	M	Y	Y	Y	Y
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I am/We are the account holder of your Branch having SB/CD No. \_\_\_\_\_ and also Member of your bank, Membership No. is \_\_\_\_\_. I/We would like to take a Locker on rent basis from your \_\_\_\_\_ Branch. I am /We are agreed with the present rules & regulation about operation and will be binding on me/us. I/We also agree to deposit Locker Key deposit of Rs. \_\_\_\_\_ at your branch.

(Mark as ✓)	Customer type	<input type="checkbox"/> Public	<input type="checkbox"/> Staff	<input type="checkbox"/> Trust	<input type="checkbox"/> Firm
		<input type="checkbox"/> Co-op Society		<input type="checkbox"/> Company	<input type="checkbox"/> Co-op Bank
		<input type="checkbox"/> HUF		<input type="checkbox"/> Partnership	<input type="checkbox"/> Other _____
	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Third Gender _____	

Name of Locker Holder/Name of person's authorised to operate account

Name

Middle Name

Surname

1 \_\_\_\_\_  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_  
 4 \_\_\_\_\_

Passport size  
photograph

1<sup>st</sup> Applicant

Passport size  
photograph

2<sup>nd</sup> Applicant

Passport size  
photograph

3<sup>rd</sup> Applicant

Passport size  
photograph

4<sup>th</sup> Applicant

Signature(s)/Thumb impression(s)  
Sole/First Holder

Signature(s)/Thumb impression(s)  
Sole/Second Holder

Signature(s)/Thumb impression(s)  
Sole/Third Holder

Signature(s)/Thumb impression(s)  
Sole/Fourth Holder

**Authority to operate the Locker as under [Mark as (✓)]**

- ☐ Single ☐ Joint ☐ Either or Survivor ☐ First Person as mentioned in Application  
☐ Second Person as mentioned in Application ☐ Both Person as mentioned in Application

PAN No.

Aadhaar No.

Communication Address / \_\_\_\_\_

City : \_\_\_\_\_ Pincode : \_\_\_\_\_ State : \_\_\_\_\_ Email id: \_\_\_\_\_

Country : \_\_\_\_\_ Phone No. : \_\_\_\_\_ Mobile No.: \_\_\_\_\_





# Kallappanna Awade Ichalkaranji Janata Sah. Bank Ltd. (Multi State Scheduled Bank)

## Authority to Debit Locker Rent

I/We hereby authorize you to debit yearly rent to My/Our Saving/Current account No. \_\_\_\_\_ with your branch \_\_\_\_\_ on due date of Locker Rent every subsequent year with applicable Tax, GST etc if applicable, and recover the same. For that I/We have consent for the same.

Date : / /

Signature of hirer

## NOMINATION FORM SL-1 :

NOMINATION UNDER SECTION 45-ZE READ WITH SECTION 56 OF THE BANKING REGULATION ACT, 1949 AND RULE 4(1) OF THE CO-OPERATIVE BANKS (NOMINATION) RULES, 1985 BY SOLE HIRER IN RESPECT OF SAFETY LOCKER

I/We, \_\_\_\_\_ nominate the following person to whom in the event of my/minors death, Kallappanna Awade Ichalkaranji Janata Sahakari Bank Ltd., of branch \_\_\_\_\_ may give access to the locker and liberty to remove the contents of the locker, particulars whereof are given below:

Locker Type	Locker No.	Nominees Name & Address	Age	Relationship	If Nominee is a minor, his date of birth

Only one person can be nominated

## Guardian details (if nominee is a minor)

Name and Address :- \_\_\_\_\_

Place : \_\_\_\_\_ ( \_\_\_\_\_ )

Date : / / Signature of Locker Holder

**Witness :** Two witnesses are necessary for nomination only where the

1) Locker Holder is illiterate

2) Nominee is minor

**Witness :**

**Witness :**

Signature : \_\_\_\_\_

Signature : \_\_\_\_\_

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

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

Address : \_\_\_\_\_

Address : \_\_\_\_\_

Mob. No. : \_\_\_\_\_

Mob. No. : \_\_\_\_\_

## Office Use Only

I/We have verified the KYC of the applicant and He/She deposited Locker Key deposit, having LKDP A/c No. \_\_\_\_\_ of Rs. \_\_\_\_\_ as per bank rule. We have allotted Locker No. \_\_\_\_\_ to the applicant from \_\_\_\_\_ on annual rent basis.

Date : / /

( \_\_\_\_\_ )  
Branch Manager

I/We received Locker Key No. \_\_\_\_\_ for Locker No. \_\_\_\_\_

( \_\_\_\_\_ )

( \_\_\_\_\_ )

( \_\_\_\_\_ )

( \_\_\_\_\_ )

Signature of Locker Holder

Signature of Locker Holder

Signature of Locker Holder

Signature of Locker Holder

Place :

Date :