



༄༅ །། འབྲུག་གི་ཨིན་གྱི་དངུལ་ཁང་ཚད་མཐོན།

DRUK PNB BANK LIMITED

Branch Office
CUSTOMERS MASTER FORM



(To be filled by bank)

Customer ID No. [grid]

(To be filled in separately by every individual)

TICK THE APPROPRIATE BOXES, WHEREVER REQUIRE

Applicant Personal Details:

1 YOUR TITLE :*

* INDICATES MANDATORY FIELD

- Mr Mrs Miss M/S Master Dasho HM HRH HE LAM
Ashi Aum Dr Lyonpo Lieutenant Captain Major Brigadier Others

2 CUSTOMER TYPE *(Please tick the appropriate box):

- Individual Individual(Minor) Staff Sole Proprietorship Civil Society Org. NGO's
Business Corporate Govt. Autonomous Pvt Companies Student
Religious Org. Partnership Co. Politician Association & Clubs NRB Non-resident Bhutanese Arm Force

3 YOUR FULL NAME:*

4 GENDER:* Male Female Date Of Birth:*

5 NATIONALITY:* Bhutanese Non-Bhutanese

6 IDENTIFICATION DOCUMENT TYPE*: (Please tick the appropriate box)

Table with 2 columns: Document Type (CID No., Work Permit, Passport No., Business License No., Registration No.) and Expiry Date.

7 EDUCATION QUALIFICATION*: (Please tick the appropriate box)

- Non-Graduate Graduate Post Graduate Others #
Specify any Other

8 FATHER/MOTHER'S NAME:*

CID No./Others: [grid]

9 MARITAL STATUS: Married Unmarried, If Married

Name Of Spouse:
Address:
Contact No.: CID No. Others No.

10 OCCUPATION*: (Please tick the appropriate box)

- Parliamentarian Civil Servant Monk/Nun Corp. Employee
Public Servant Local Govt Employee Pensioner Pvt Employee
Self Employed Student Farmer Arm Force
Home Maker Business Diplomats International Agency
Layman

If Employed,

Organization Name in full:

Address :

Current DesignationTPN No.: Office Tel.No. :

11 GROSS ANNUAL INCOME:* Nu.

- NU.0-NU.50,000 NU 50,001-NU.100,000 NU.100,001-NU.300,000
 NU.300,001-NU.500,000 NU.500,001-NU.1,000,000 NU.1,000,001-NU.1,500,000
 NU.1,500,001-NU.2,000,000 NU.2,000,001 & ABOVE

12 SOURCE(S) OF INCOME/FUND:* (Please tick the appropriate box)

- Salary Business Rental Dividend/Commission
 Cash Crops Inheritance Parents Others:

13 MOBILE NO:*

14 EMAIL ID:

15 PERMANENT ADDRESS (Address of Census Registration):*

House No:	Thram No:	Village:
Gewog:	Dungkhag:	Dzongkhag

16 WHERE DO YOU LIVE AT PRESENT?*

Building No:	Flat No.:	Street/Road Name:
City/Village:	Gewog/Thromde:	Dzongkhag:

17 MINOR Account: Yes No **if yes , furnish details of guardian in table below**

a. Relationship with minor <input type="checkbox"/> father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian
b. Name of Guardian: Mr/Ms .:
c. Address of guardian :

I hereby declare that the date of birth of the minor is/...../ who is my (relationship)and I am his/her natural guardian/lawful guardian appointed vide court order dated(copy enclosed, I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I indemnify the Bank against the claim of the above minor for any withdrawal/transaction made by me in his / her account.

DATE _____

PLACE _____

SIGNATURE OR THUMB IMPRESSION OF GUARDIAN

18 Whether a bank staff member Yes No if yes, Employee ID No. _____

19 Annual turn over (For CA/CS) _____

Nature of Business (Commodity type) : _____

If Yes, type of proof; Income Statement PIT/BIT/CIT Others (Specify)

20 Is Applicant Income Tax Assessed? Yes No

21 Proof of Identity : (Submit a copy of one of the identity proof document provided)

CID No.:

Passport No.:

Others :

22 Whether dealing with any other any bank, if yes, please give details below

NAME OF THE BANK & BRANCH

Facilities / Services being availed

	SF	CA	OD	TL	OTH

23 INTRODUCTION

I know Mr. /Ms. _____ for the past _____ Years as a _____ (e.g.)
Friend, relative, neighbour etc.

A. Introducer's Name

b. Introducer's Address

Phone No. :

Signature of the Introducer:

Introducer's Customer Id No.

Introducer's Account No.

24 I have read (a) the account Rules and hereby agree to be bound by the terms and conditions outlined in these rules which govern the account (s) which I am opening/will open with Druk PNB Bank Ltd, and (b) amendments to the rules made from time to time and those relating to various services availed by me. I understand that the bank may at its absolute discretion discontinue any of the services completely or partially without any notice to me. I have also been made aware of the charges application on various services provided by the Bank. I authorise the bank to debit my account for recovery of service charges/incidental charges as applicable from time to time. I hereby declare that the information furnished above is true and correct to the best of my knowledge.

Date _____

Place _____



SIGNATURE OF THUMB IMPRESSION OF CUSTOMER

Documents to be attached:

- Copy of CID/Passport/Work Permit or any other Proof Document
- Two recent Passport size Photographs
- Copy of Trade License (for CD a/c)
- Copy of Health Card (for Minor a/c)