

**CUSTOMER DETAILS** (To be filled by the Customer in CAPITAL LETTERS)

Name of Business Entity																													
Address Line 1																													
Address Line 2																													
Nearest Land Mark																													
City/District																													
State																													
Country																													
PIN																													
Office No.																													
Occupation/Designation																													
Email id (Official)																													
Monthly Income																													
Annual Income																													
Net Profit																													
Other Income																													
Business Background (✓) <input type="checkbox"/> Family Business <input type="checkbox"/> 1st Entrepreneur <input type="checkbox"/> Other Income (✓) <input type="checkbox"/> Rental <input type="checkbox"/> Agricultural <input type="checkbox"/> Other <input type="checkbox"/>																													
BANK ACCOUNT DETAILS (Please mention details of your salary account/primary account) <input type="checkbox"/> SB <input type="checkbox"/> CA <input type="checkbox"/> CC/OD																													

Name of account holder		A/c operated since	
Name of Bank		Customer ID*	
Branch		IFSC	
Account No.		MICR Code	
* Required only incase of account with CSB			

[illegible]

Application will be processed with in.....working days of receiving the application with all necessary documents, subject to the applicant providing all additional information that CSB Bank Ltd. may require solely for purposes of evaluating the credit worthiness of the applicant

Date & Time of receipt

Stamp/Signature_____

Contact of SM _____

