



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচসি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ
“ILGUS BHAVAN”, HC Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-75/2014(pt.)/ 2025

21.09.2020

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.


**Sub: Electronic Transfer of Fund debiting this office
Current Account No. 34061121921**

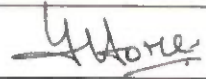
Shelter for Urban Homeless (SUH) - NULM

Sir,

You are requested to kindly arrange for electronic transfer of funds as per details given below debiting the amounts from this office Current Account No. **34061121921** lying with your branch **under DAY-NULM**.

Sl. No.	Name of Payee	Amount (In Rs.)	Payees' Bank Details
01	STATE URBAN DEVELOPMENT AGENCY-NULM-SUH	3,00,00,000.00	Axis Bank Limited, Chetla Branch, A/C No. 920010051638841, IFS Code. UTIB0002793
TOTAL		3,00,00,000.00	
(Rupees three crore only)			


(Petrus Anuranjan Soreng)
Finance Officer
SUDA


(Goutam Hore)
Finance Officer
SUDA



23/09/2020

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

1148881/2020/ACCT SEC(SUDA)



AXIS BANK

ACCOUNT NUMBER- 920010051638841

CUSTOMER ID- 863033113

ACCOUNT NAME- STATE URBAN DEVELOPMENT AGENCY- NULM- SUH

ACCOUNT OPEN DATE- 03.08.2020

ADDRESS- STATE URBAN DEVELOPMENT AGENCY, ILGUS BHAVAN,
HC BLOCK SETOR -111, BIDHANNAGAR
NEAR PANCHAYAT BHAVAN
PIN- 700106

STATE- WEST BENGAL

EMAIL- WBSUDADIR@GMAIL.COM

BANK/BRANCH- AXIS BANK LTD/ CHETLA BRANCH

MICR CODE- 700211123

IFSC – UTIB0002793

BRANCH CODE- 2793



Rakhi Karmakar
RAKHI KARMAKAR 2354
AVP & Branch Head
S.S. No.- 2354
Axis Bank Ltd.
Chetla Branch



রাজ্য নগর উন্নয়ন সংস্থা



STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ
“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-75/2014(pt.)/7276
ক্রমিক নং

07.11.2019

তারিখ

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.


**Sub: Electronic Transfer of Fund debiting this office
Current Account No. 34061121921**

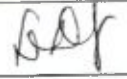
Shelter for Urban Homeless (SUH) - NULM

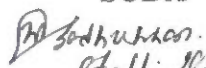
Sir,

You are requested to kindly arrange for electronic transfer of funds as per details given below debiting the amounts from this office Current Account No. **34061121921** lying with your branch in respect of **shelter for Urban Homeless under DAY-NULM**.

Sl. No.	Name of Payee	Amount (In Rs.)	Payees' Bank Details
01	State Urban Development Agency, SUH(NULM)	12,00,00,000.00	State Bank Of India, Salt Lake, Sector-I Branch, A/C No. 37715094723, IFS Code. SBIN0001612
TOTAL		12,00,00,000.00	
(Rupees twelve crore only)			


(Petrus Anuranjan Soreng)
Finance Officer
SUDA


(Debarati Dutta Gupta)
Director
SUDA


07.11.2019

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

Note No. #1

This file is created in continuation with physical file no. SUDA-75/2014(Pt) NSP-15.

Sub: Regarding opening of another Bank A/C for Shelter for Urban Homeless (SUH) under DAY-NULM at Axis Bank, Chetla Branch

A offer from the Branch Head, Axis Bank Ltd., Chetla Branch, Kolkata dated 29.06.2020 received by this office may kindly be seen (C.P. No.03 to 05).

Earlier, in nos. of occasions, authority of Axis Bank Ltd., Chetla Branch offered their bouquet of services with a request to build a relationship with them by way of maintaining dedicated scheme account for AMRUT, NULM, NSAP and PMAY etc.

In the present proposal, authority of Axis Bank Ltd., Chetla Branch has stated that Axis Bank

1. is among the first few banks in India already integrated with PFMS platform.
2. has the vast network chain all over India through its branches as well as ATMs.
3. is empanelled by the Govt. of West Bengal vide order no.9668-F(Y) dated 30.11.2012 to maintain State Govt. Business account.
4. is already integrated with SBMS platform vide order no.2603-F(Y) dated 30.04.2019.
5. is capable of processing transactions on the basis of email from the designated Id only.
6. is capable of handling DBT transactions with MIS reports.
7. will deploy outsourced personnel solely for maintaining day to day relationship with SUDA and to help out with the reconciliation activities of the account.

At present, SUDA already has a strong banking relationship with the Axis Bank Ltd., Chetla branch since December, 2018 and has no problem as such to maintain NULM account with them as per report from account section, SUDA.

It may be mentioned that as both the account of NULM & SUH is in SBI, therefore another account of SUH may be opened at Axis Bank. As verified, above facilities of Axis Bank, Chetla Branch by account section SUDA, this A/C may be opened for better services.

Accordingly, considering their proposal and bouquet of services as stated above, we may consider to open dedicated bank account at Axis Bank Ltd., Chetla branch for smooth implementation of the scheme Shelter for Urban Homeless (SUH) under National Urban Livelihood Mission since Supreme Court of India already stated in its judgment with ref. to the W.P.(C) 55 of 2003 to maintain a separate dedicated bank account (C.P. No.01 & 02) for SUH.

Submitted for your kind perusal and further process.

22/07/2020 11:54 AM

SOURMEN DE
(SMM-WBSULM(NULM)(SUDA))

Note No. #2

Please opine

22/07/2020 2:38 PM

SHAON SEN
(AD DIR(SUDA))

Note No. #3

As per order of Ministry of Housing and Urban Affairs, Government of India, which is based on order of Supreme Court of India , a separate dedicated account for the component Shelter for urban Homeless under National urban Livelihood Mission is to be maintained from the Financial year 2018-19 onwards.

To keep the account of the sub-component separate from the main account, as proposed by the branch head, Chetla branch of Axis bank, the account may be opened at their branch.

The bank has given assurance on smooth and prompt service. Already SUDA maintains the account of National Urban Health Mission with this branch and their quality of service is satisfactory.

Considering this , as proposed, the account for the component of Shelter for urban homeless may be opened at Axis Bank , Chetla branch .

22/07/2020 3:31 PM

GOUTAM HORE
(FO(ACCT)(SUDA))

Note No. #4

The above note#1 regarding opening of account for the component of Shelter for urban homeless under NULM at Axis Bank , Chetla branch may kindly be seen.

Opening of FO in Note#3 may also be seen.

For kind consideration & necessary order.

22/07/2020 4:26 PM

SHAON SEN
(AD DIR(SUDA))

Note No. #5

Note above.

Proposal for opening a new bank account for SUH component under NULM at AXIS Bank may kindly be approved.

23/07/2020 11:59 AM

SANTANU MUKHERJEE
(DIR(SUDA))

Note No. #6

23/07/2020 4:44 PM

KHALIL AHMED
(PRSECY(UDMA))

Note No. #7

26/07/2020 2:35 PM

FIRHAD HAKIM
(MIC(UDMA))

Note No. #8

26/07/2020 3:12 PM

KHALIL AHMED
(PRSECY(UDMA))

Note No. #9

26/07/2020 8:39 PM

SANTANU MUKHERJEE
(DIR(SUDA))

Note No. #10

For necessary action please.

27/07/2020 12:56 PM

GOUTAM HORE
(FO(ACCT)(SUDA))

Note No. #11

As per notes and orders

As approved, a separate bank account opened with Axis Bank Ltd., Chetla

branch for smooth implementation of SUH-NULM. Details of which is placed at the CP side.

07/08/2020 11:05 AM

NETAI GHORAI
(CASHIER(ACCT)(SUDA))

Note No. #12

07/08/2020 2:46 PM

GOUTAM HORE
(FO(ACCT)(SUDA))

Note No. #13

As per notes and orders

File placed for further necessary actions regarding transfer of fund to newly opened account.

17/08/2020 5:53 PM

NETAI GHORAI
(CASHIER(ACCT)(SUDA))

Note No. #14

As proposed above, as the new Bank account for the scheme Shelter for Urban Homeless (**Account No. 920010051638841**) has been opened in Axis Bank, Chelta Branch as per approval of competent authority, now an amount **Rs. 1.0 Crore** may be transferred to this Axis Bank account no. **920010051638841** initially for necessary fund released towards different ULBs for smooth implementation of the scheme Shelter for Urban Homeless (SUH) under DAY-NULM from this office NULM current account no. **34061121921** for the FY 2020-21.
Submitted for your kind perusal.

18/08/2020 11:53 AM

SOUMEN DE
(SMM-WBSULM(NULM)(SUDA))

Note No. #15

For n/a

19/08/2020 2:51 PM

SHAON SEN
(AD DIR(SUDA))

Note No. #16

Please take necessary action.

19/08/2020 3:28 PM

GOUTAM HORE
(FO(ACCT)(SUDA))

Note No. #17

As per notes and orders

As approved, to transfer the SUH fund from A/C No.34061121921 held with State Bank of India, Salt Lake, Sector-1 branch to A/C No.920010051638841 newly opened with Axis Bank Ltd., Chetla branch, a transfer advice amounting to Rs.1,00,00,000/- (Rupees One Crore) only was prepared and duly submitted into the State Bank of India, Salt Lake, Sector-1 branch for onward transfer of SUH fund.

27/08/2020 9:01 AM

NETAI GHORAI
(CASHIER(ACCT)(SUDA))

Note No. #18

Fund transferred. Now file is returned for necessary action.

28/08/2020 11:49 AM

GOUTAM HORE
(FO(ACCT)(SUDA))

Note No. #19

Sub: Transfer of fund from NULM account to dedicated bank a/c of SUH for necessary fund releases towards ULBs for the Shelter for Urban Homeless (SUH) under DAY-NULM

This office has recently received an amount of Total Rs. 57,16,13,333(Central:Rs.342968000.00 Sate: Rs.228645333.00) as fund for the implementation of the programme DAY-NULM including the scheme SUH for the FY 2020-21. Now from this total amount as per prevailing norms we may transfer an amount of Rs. 3 Corore to the dedicated bank a/c of SUH for necessary fund transfer to the ULBs for implementation of the aforesaid scheme initially. An amount of **Rs. 3.0 Crore** may be transferred to the Axis Bank account no. **920010051638841** of this office (SUH dedicated

account) initially for necessary fund released towards different ULBs for smooth implementation of the scheme Shelter for Urban Homeless (SUH) under DAY-NULM from this office NULM current account no. 34061121921 for the FY 2020-21.

Submitted for your kind perusal.

18/09/2020 1:51 PM

SOUMEN DE
(SMM-WBSULM(NULM)(SUDA))

Note No. #20

FO may kindly do the needful

18/09/2020 3:12 PM

SHAON SEN
(AD DIR(SUDA))

Note No. #21

Please process.

18/09/2020 4:09 PM

GOUTAM HORE
(FO(ACCT)(SUDA))

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-75/2014(pt.)/৬৬৭

16.09.2019

ক্রমিক নং

তারিখ

From : Director, SUDA

To : The Manager,
 State Bank of India,
 Salt Lake City, Kolkata - 700 091.


**Sub: Electronic Transfer of Fund debiting this office
 Current Account No. 34061121921**

Shelter for Urban Homeless (SUH) - NULM

Sir,


You are requested to kindly arrange for electronic transfer of funds as per details given below debiting the amounts from this office Current Account No. **34061121921** lying with your branch in respect of **shelter for Urban Homeless under DAY-NULM**.

Sl. No.	Name of Payee	Amount (In Rs.)	Payees' Bank Details
01	State Urban Development Agency, SUH(NULM)	3,00,00,000.00	State Bank Of India, Salt Lake, Sector-I Branch, A/C No. 37715094723, IFS Code. SBIN0001612
TOTAL		3,00,00,000.00	
(Rupees three crore only)			


 (Petrus Anuranjan Soreng)
 Finance Officer
 SUDA




 (Debarati Dutta Gupta)
 Director
 SUDA


 M. Sedhukhan.
 16.09.2019.

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

STATE URBAN DEVELOPMENT AGENCY

State Bank of India - SUH (NULM) Book

1-Sep-2019 to 12-Sep-2019

Page 1

Date	Particulars	Vch Type	Vch No.	Debit	Credit
1-9-2019	To			69,81,043.54	
12-9-2019	By	Operation & Maintenance of SUH-NULM	Payment SUDA/995/19-20		1,36,025.00
	By	Construction of Shelters for Urban Homeless - NULM	Payment SUDA/996/19-20		24,47,000.00
				69,81,043.54	25,83,025.00
	By	Closing Balance			43,98,018.54
				69,81,043.54	69,81,043.54

রাজ্য নগর উন্নয়ন সংস্থা
STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ
“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

ক্রমিক নং SUDA-75/2014(pt.)/ 4916

তারিখ 30.07.2019

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.


**Sub: Electronic Transfer of Fund debiting this office
Current Account No. 34061121921**

Shelter for Urban Homeless (SUH) - NULM

Sir,

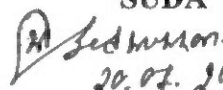
You are requested to kindly arrange for electronic transfer of funds as per details given below debiting the amounts from this office Current Account No. **34061121921** lying with your branch in respect of **shelter for Urban Homeless under DAY-NULM**.

Sl. No.	Name of Payee	Amount (In Rs.)	Payees' Bank Details
01	State Urban Development Agency, SUH(NULM)	3,00,00,000.00	State Bank Of India, Salt Lake, Sector-I Branch, A/C No. 37715094723, IFS Code. SBIN0001612
TOTAL		3,00,00,000.00	
(Rupees three crore only)			


(Petrus Anuranjan Soreng)
Finance Officer
SUDA




(Debarati Dutta Gupta)
Director
SUDA


30.07.2019.

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

STATEMENT OF ACCOUNT

Name : STATE URBAN DEVELOPMENT AGENCY SUH(NULM)
 HC BLOCK, SECTOR-III, SALT LAKE
 (ILGUS BHAVAN)
 KOLKATA - 700091
 North Twenty Four Parganas
 Date : 26/07/2019 Time : 15:43:42
 Cleared Balance : 17,534.00Cr
 +MOD Bal : 3,43,272.54Cr
 Limit : 0.00
 Int. Rate : 0.00 % p.a.
 Statement From : 01/07/2019 to 26/07/2019

STATE BANK OF INDIA
 SALT LAKE(SECTOR-1)CALCUTTA.
 DB-2, SECTOR-1, CALCUTTA,
 KOLKATA DT:24 PARGANAS (N), W. BENGAL
 700064
 Branch Phone : 23374598
 IFSC : SBIN0001612
 MICR : 700002145
 Account No.: 37715094723
 Product : CA-SURABHI-PUB OTH-ALL-INR
 Currency : INR

E-mail : wbsudadir@gmail.com
 Uncleared Amount : 0.00
 Drawing Power : 0.00
 Nominee Name :
 Page No. : 1

Post Date	Value Date	Details	Chq.No	Debit	Credit	Balance
		BROUGHT FORWARD :				109503.00Cr
04/07/19	04/07/19	SWEEP TRF CREDIT SWEEP DEPOSIT BY TRA TRF FR 0037913053861 INT: 1390900ROI:			314406.00	423909.00Cr
04/07/19	04/07/19	WDL TFR NEFT UTR NO: SBIN319 185021485 BARB0HOWECX BANK OF AT 01612 SALT LAKE(S)		400000.00		23909.00Cr
12/07/19	12/07/19	SWEEP TRF CREDIT SWEEP DEPOSIT BY TRA TRF FR 0037913053861 INT: 11181400ROI:			2464905.00	2488814.00Cr
12/07/19	12/07/19	WDL TFR NEFT UTR NO: SBIN119 193066331 UTBI0HRNQ36 UNITED B AT 01612 SALT LAKE(S)		2367000.00		121814.00Cr
19/07/19	19/07/19	SWEEP TRF CREDIT SWEEP DEPOSIT BY TRA TRF FR 0037913053861 INT: 753400ROI:			162570.00	284384.00Cr
19/07/19	19/07/19	WDL TFR NEFT UTR NO: SBIN119 200276084 IOBA0001483 INDIAN O AT 01612 SALT LAKE(S)		266850.00		17534.00Cr
		CLOSING BALANCE :				17,534.00Cr

Statement Summary

Dr. Count 3 Cr. Count 3 30,33,850.00 29,41,881.00

In Case Your Account Is Operated By A Letter Of Authority/Power Of Attorney Holder, Please Check The Transaction With Extra Care.

*** END OF STATEMENT ***

Bank balance as on 12-07-19 as 2,75,783.54
 Per Cash Book

Add:- Interest for June, 19 taken 2,18,616.00
 on A/c on later date

Add:- Interest for July, 19 (upto 12-07-19) 1,25,723.00
 yet to be taken into A/c.

Bank balance as per Bank
 Statement (1,21,814 + 4,98,308.54) 6,20,122.54

STATEMENT OF ACCOUNT

Name : STATE URBAN DEV AGENCY W B (SUDA)
 HC BLOCK, SECTOR-III, SALT LAKE
 (ILGUS BHAVAN)
 KOLKATA - 700091
 North Twenty Four Parganas

Date : 26/07/2019 Time : 15:43:49
 Cleared Balance : 3,43,272.54Cr
 +MOD Bal : 0.00
 Limit : 0.00
 Int. Rate : 6.70 % p.a.
 Statement From : 01/07/2019 to 26/07/2019

STATE BANK OF INDIA
 SALT LAKE(SECTOR-1)CALCUTTA.
 DB-2, SECTOR-1, CALCUTTA,
 KOLKATA DT:24 PARGANAS (N), W. BENGAL
 700064
 Branch Phone : 23374598
 IFSC : SBIN0001612
 MICR : 700002145
 Account No.: 37913053861
 Product : STDBLKSURBHICPUBOTH 1Y-<2Y>10C
 Currency : INR

E-mail : wbsudadir@gmail.com
 Uncleared Amount : 0.00
 Drawing Power : 0.00
 Nominee Name :
 Page No. : 1

Post Date	Value Date	Details	Chq.No	Debit	Credit	Balance
		BROUGHT FORWARD :				3151896.54Cr
04/07/19	04/07/19	INTEREST CREDIT			13909.00	3165805.54Cr
04/07/19	04/07/19	T PAID AT 05400%		314406.00		2851399.54Cr
04/07/19	04/07/19	NPB WDL TRF PREMATURE PAYMENT OF TRF TO 0037715094723				2963213.54Cr
12/07/19	12/07/19	INTEREST CREDIT			111814.00	2963213.54Cr
12/07/19	12/07/19	T PAID AT 05400%		2464905.00		498308.54Cr
12/07/19	12/07/19	NPB WDL TRF PREMATURE PAYMENT OF TRF TO 0037715094723				505842.54Cr
19/07/19	19/07/19	INTEREST CREDIT			7534.00	505842.54Cr
19/07/19	19/07/19	T PAID AT 05400%		162570.00		343272.54Cr
19/07/19	19/07/19	NPB WDL TRF PREMATURE PAYMENT OF TRF TO 0037715094723				343272.54Cr
		CLOSING BALANCE :				3,43,272.54Cr

Statement Summary

Dr. Count 3 Cr. Count 3 29,41,881.00 1,33,257.00

In Case Your Account Is Operated By A Letter Of Authority/Power Of Attorney Holder, Please Check The Transaction With Extra Care.

*** END OF STATEMENT ***

STATEMENT OF ACCOUNT

STATE BANK OF INDIA
 SALT LAKE(SECTOR-1)CALCUTTA
 DB-2,SECTOR-1, CALCUTTA,
 KOLKATA DT:24 PARGANAS (N), W. BENGAL
 700064
 Branch Phone :23374598
 IFSC : SBIN001612
 MICR : 700002145
Account No.:37913053861
Product : STDBLKSURBHICPUBOTH 1Y-<2Y>10C
Currency : INR

Name : STATE URBAN DEV AGENCY W B (SUDA)
 HC BLOCK,SECTOR-III,SALT LAKE
 {ILGUS BHAVAN}
 KOLKATA - 700091
 North Twenty Four Parganas

Date : 19/07/2019

Time : 13:49:45

E-mail : wbsudadir@gmail.com

Cleared Balance : 4,98,308.54Cr

Uncleared Amount : 0.00

+MOD Bal : 0.00

Limit : 0.00

Drawing Power : 0.00

Int. Rate : 6.70 % p.a.

Nominee Name :

Statement From : 01/06/2019 to 30/06/2019

Page No. : 1

Post Date	Value Date	Details	Chq.No	Debit	Credit	Balance
		BROUGHT FORWARD :				7993770.54Cr
10/06/19	10/06/19	INTEREST CREDIT			10106.00	8003876.54Cr
10/06/19	10/06/19	T PAID AT 05400%				
10/06/19	10/06/19	NPB WDL TRF		247393.00		7756483.54Cr
		PREMATURE PAYMENT OF				
		TRF TO 0037715094723				
10/06/19	10/06/19	INTEREST CREDIT			5562.00	7762045.54Cr
10/06/19	10/06/19	T PAID AT 05400%				
10/06/19	10/06/19	NPB WDL TRF		136156.00		7625889.54Cr
		PREMATURE PAYMENT OF				
		TRF TO 0037715094723				
28/06/19	28/06/19	INTEREST CREDIT			103445.00	7729334.54Cr
28/06/19	28/06/19	T PAID AT 05400%				
28/06/19	28/06/19	NPB WDL TRF		2383883.00		5345451.54Cr
		PREMATURE PAYMENT OF				
		TRF TO 0037715094723				
28/06/19	28/06/19	INTEREST CREDIT			99503.00	5444954.54Cr
28/06/19	28/06/19	NPB WDL TRF		2293058.00		3151896.54Cr
		PREMATURE PAYMENT OF				
28/06/19	28/06/19	T PAID AT 05400%				
		TRF TO 0037715094723				
		CLOSING BALANCE :				31,51,896.54Cr

Statement Summary

Dr. Count 4

Cr. Count 4

50,60,490.00

2,18,616.00

In Case Your Account Is Operated By A Letter Of Authority/Power Of Attorney Holder, Please Check The Transaction With Extra Care.

-- END OF STATEMENT ---

STATE URBAN DEVELOPMENT AGENCY
State Bank of India - SUH (NULM) Book

1-Jul-2019 to 14-Jul-2019

Page 1

Date	Particulars	Vch Type	Vch No.	Debit	Credit
1-7-2019	To Opening Balance			26,42,783.54	
12-7-2019	By Construction of Shelters for Urban Homeless - NULM Payment		SUDA/652/19-20		(23,67,000.00)
	Primary Cost Category				
	Rajpur Sonarpur Municipality	23,67,000.00 Dr			
	Primary Cost Category				
	Rajpur Sonarpur Municipality	23,67,000.00 Cr			
	Cheque	12-7-2019	23,67,000.00 Cr		
	<i>FUND ELECTRONICALLY TRANSFERRED FROM SBI, S/L, SR. I BR. TO RESPECTIVE BANK A/C OF RAJPUR-SONARPUR MUNICIPALITY IN RESPECT OF CONSTR. OF SUH NULM AGAINST TAD NO. SUDA -23/2014(MPR)/4575 DT. 11.07.19</i>				
				26,42,783.54	23,67,000.00
	By Closing Balance				2,75,783.54
				26,42,783.54	26,42,783.54

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

ক্রমিক নং SUDA-75/2014(pt.)/4800

তারিখ 22.07.2019

From : Director, SUDA

To : The Manager,
 State Bank of India,
 Salt Lake City, Kolkata - 700 091.

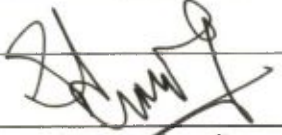
**Sub: Electronic Transfer of Fund debiting this office
 Current Account No. 34061121921**

Shelter for Urban Homeless (SUH) - NULM

Sir,

You are requested to kindly arrange for electronic transfer of funds as per details given below debiting the amounts from this office Current Account No. **34061121921** lying with your branch in respect of **shelter for Urban Homeless under DAY-NULM**.

Sl. No.	Name of Payee	Amount (In Rs.)	Payees' Bank Details
01	State Urban Development Agency, SUH(NULM)	3,00,00,000.00	State Bank Of India, Salt Lake, Sector-I Branch, A/C No. 37715094723, IFS Code. SBIN0001612
TOTAL		3,00,00,000.00	
(Rupees three crore only)			


 (Petrus Anuranjan Soreng)
 Finance Officer
 SUDA


 (Debarati Dutta Gupta)
 Director
 SUDA

22.07.2019.

দুরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

সুডা

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ

“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA

Kalyan M. Keep it into file of SUDA.
24.08.18

SUDA- 75/2014/

24.08.2018

ক্রমিক নং

তারিখ

To: Surender Kumar,
Under Secretary to the Government of India,
Ministry of Housing and Urban Affairs

Sub: Separate Bank account for Shelter for Urban Homeless in West Bengal


Sir,

In reference to the letter memo no. 12018(11)/1/2017-UPA II Section (EFS-3146332) dated: 04.12.2017 this is to inform you that a separate bank account has been opened for the scheme Shelter for Urban Homeless in West Bengal. Already funds have been earmarked for the separate account of Shelter for Urban Homeless under DAY-NULM. Details of the bank account are given below:

STATE BANK OF INDIA, SALT LAKE SECTOR- I BRANCH
IFS CODE: SBIN0001612
A/C NO. 37715094723

This is for your kind information & further process.

Yours faithfully,


24/8/18


Director, SUDA
& Mission Director, WBSULM
Date: 24.08.2018

Memo. No. 75/2014/828/1(2)

Copy forwarded for information to:

1. Sr. PA to Principal Secretary, UD & MA Dept., Govt. of West Bengal
2. Financial Advisor, SUDA

OK


24/8/18

Director, SUDA
& Mission Director, NULM

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

সুডা

০/৮

SUDA

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ
“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA- 75/2014/৪২৪

24.08.2018

ক্রমিক নং

তারিখ

To: Surender Kumar,
Under Secretary to the Government of India,
Ministry of Housing and Urban Affairs

Sub: Separate Bank account for Shelter for Urban Homeless in West Bengal

Sir,

In reference to the letter memo no. 12018(11)/1/2017-UPA II Section (EFS-3146332) dated: 04.12.2017 this is to inform you that a separate bank account has been opened for the scheme Shelter for Urban Homeless in West Bengal. Already funds have been earmarked for the separate account of Shelter for Urban Homeless under DAY-NULM. Details of the bank account are given below:

STATE BANK OF INDIA, SALT LAKE SECTOR- I BRANCH
IFS CODE: SBIN0001612
A/C NO. 37715094723

This is for your kind information & further process.

Yours faithfully,

৮/১

Director, SUDA
& Mission Director, WBSULM
Date: 24.08.2018

Memo. No. 75/2014/৪২৪/১(২)

Copy forwarded for information to:

1. Sr. PA to Principal Secretary, UD & MA Dept., Govt. of West Bengal
2. Financial Advisor, SUDA

৮/১
২৪/৮/১৮

Director, SUDA
& Mission Director, NULM

দুরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408



রাজ্য নগর উন্নয়ন সংস্থা



STATE URBAN DEVELOPMENT AGENCY

ইলেকট্রনিক ডেবিট, ২১.০৮.২০১৮, ৩১৫৩/১৮

"JUGLUBHAWAN", III C Road, Sector - II, Beliungga, Kolkata - 700 091, West Bengal.

SUDA-94/2014(pt-1)/811

21.08.2018

ক্রমিক নং

তারিখ

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.

**Sub: Electronic Transfer of Fund debiting this office
Current Account No. 34061121921.**


Shelter for Urban Homeless (SUH)-NULM

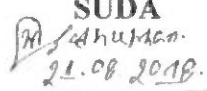
Sir,

You are requested to kindly arrange for electronic transfer of funds as per details given below debiting the amounts from this office Current Account No. **34061121921** lying with your branch in respect of **Shelter for Urban Homeless (SUH)-NULM**.

Sl. No.	Name of Payee	Amount (In Rs.)	Payees' Bank Details
01	State Urban Development Agency, SUH(NULM)	10,47,32,934.00	State Bank Of India, salt Lake, Sector-I Branch, A/C No. 37715094723, IFS Code. SBIN0001612
TOTAL		10,47,32,934.00	
(Rupees Ten Crore fourty seven lakh thirty two thousand nine hundred thirty four only)			


(Md Asif Sardar)
Finance Officer
SUDA


(Petrus Anuranjan Soreng)
Finance Officer
SUDA


M. Anuranjan.
21.08.2018.

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767. Fax : 2358 5800 E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

SUDA- 75/2014/

13.08.2018

**To: Surender Kumar,
Under Secretary to the Government of India,
Ministry of Housing and Urban Affairs**

Sub: Separate Bank account for Shelter for Urban Homeless in West Bengal

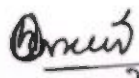
Sir,

In reference to the letter memo no. **12018(11)/1/2017-UPA II Section (EFS-3146332) dated: 04.12.2017** this is to inform you that a separate bank account has been opened for the scheme Shelter for Urban Homeless in West Bengal. Already funds have been earmarked for the separate account of Shelter for Urban Homeless under DAY-NULM. Details of the bank account are given below:

**STATE BANK OF INDIA, SALT LAKE SECTOR- I BRANCH
IFS CODE: SBIN0001612
A/C NO. 37715094723**

This is for your kind information & further process.

Yours faithfully,


Director, SUDA ^{20/8/18}
& Mission Director, WBSULM



भारतीय स्टेट बैंक
State Bank of India

ग्राहक संख्या / Customer No.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

खाता क्र० / Account No.

600 31715094723

शाखा / Branch

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

गैर-व्यक्तिगत ग्राहक खाता / ACCOUNT OPENING FORM FOR CUSTOMERS OTHER THAN INDIVIDUALS

NEW

UPDATE

खाते का प्रकार / Type of account	अपेक्षित सेवाएं / Services Required
चालू खाता / Current Account <input checked="" type="checkbox"/>	Internet Banking : Viewing rights: Yes <input type="checkbox"/> No <input type="checkbox"/>
बचत खाता / Savings Bank Account <input type="checkbox"/>	Transaction Right: Yes <input type="checkbox"/> No <input type="checkbox"/>
आवर्ती जमा खाता / Recurring Deposit <input type="checkbox"/>	SMS Alerts : Required <input checked="" type="checkbox"/> Not Required <input type="checkbox"/>
मीयादी जमा खाता / Term Deposit <input type="checkbox"/>	Cheque Book : Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
विशेष मीयादी जमा खाता / Special Term Deposit <input type="checkbox"/>	SME Insta Deposit Card : Yes <input type="checkbox"/> No <input type="checkbox"/>
अन्य / other (कृपया उल्लेख करें / please specify) <input type="checkbox"/>	Business Debit Card : Yes <input type="checkbox"/> No <input type="checkbox"/>
	POS : Yes <input type="checkbox"/> No <input type="checkbox"/>
	Statement Frequency: Monthly <input checked="" type="checkbox"/> Half-Yearly <input type="checkbox"/> Quarterly <input type="checkbox"/>
	e-Statement to be sent to email id: <input type="text"/>

Instructions:

- Fields marked with "*" are mandatory
- Please Fill the Form in English and in BLOCK letters

ENTITY DETAILS

कृपया निचे दिए विवरण के अनुसार खाता खोले / Please open above mentioned deposit account(s) as per details below:

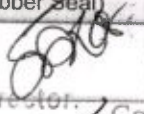
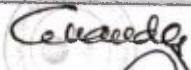
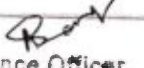

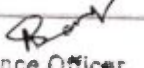

पूरा नाम (स्पष्ट अक्षरों में) / NAME OF THE ENTITY (IN BLOCK LETTERS) *

STATE URBAN DEVELOPMENT AGENCY

- SUH (NULM)

Legal Entity Identifier (L.E.I Code .No.)

① SUTANU PRASAD KAR DIRECTOR SUDA		② PETRUS ANURANJAN SORENG FO, SUDA		③ ASIF SARDAR FO, SUDA	
---------------------------------------------------	-------------------------------------------------------------------------------------	-------------------------------------------------	-------------------------------------------------------------------------------------	-------------------------------------	---------------------------------------------------------------------------------------

स्वत्वधारी / भागीदारों / व्यक्तियों (कंपनी / न्यास आदि के संबंध में) के नाम जो खाता परिचालन के लिए प्रधिकृत है. Name's of Proprietor/Partners/Persons In case of Companies/Trusts etc. authorised to operate the account	नमूना हस्ताक्षर (रबर स्टैम्प के साथ) Specimen Signature (with Rubber Seal)	जांचकर्ता अधिकारी के हस्ताक्षर नाम और नमूना हस्ताक्षर क्रमांक Signature, Name and S.S. No. of Verifying Official
1. SUTANU PRASAD KAR		
2. PETRUS ANURANJAN SORENG		
3. ASIF SARDAR		

Director
State Urban Development Agency
Govt. of West Bengal

Finance Officer
State Urban Development Agency
Govt. of West Bengal

Finance Officer
State Urban Development Agency
Govt. of West Bengal

Finance Officer
State Urban Development Agency
Govt. of West Bengal

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-75/2014(Pt.)/

22.05.2018

ক্রমিক নং

তারিখ

From Director, SUDA

To The Branch Manager,
 State Bank of India,
 Salt Lake, Sector-I Branch,
 DB-2, Salt Lake City,
 Kolkata-700064.

**Sub.: Opening of Current Account for Shelter for Urban Homeless (SUH)
 under National Urban Livelihood Mission (NULM) Scheme.**

Sir,

It is decided to open a separate current account with your branch in the name of “State Urban Development Agency-SUH (NULM)”.

Accordingly, signed account opening form alongwith specimen signature card are forwarded herewith for opening of aforesaid new current account.

Further, underlying norms would be followed during operation of this new account –

01. This account would be operated jointly by any two of following three officials of SUDA.
 01. Mr. Sutanu Prasad Kar, IAS, Director, SUDA, 02. Md Asif Sardar, WBA & AS, Finance Officer, SUDA and 03. Mr. Petrus Anuranjan Soreng, WBA & AS, Finance Officer, SUDA.
02. After retaining minimum balance of Rs.50,000/- in current account, idle fund would have to be invested in CLTD / Autosweep account in regular interval.
03. Since this office has registration U/s 12A & 10 (23C) with the Income Tax Department and submits regular Income Tax return annually, no TDS should be deducted from the interest earned on CLTD / Autosweep accounts.

Thanking you.

Yours faithfully,



(Md Asif Sardar)
 Finance Officer
 SUDA

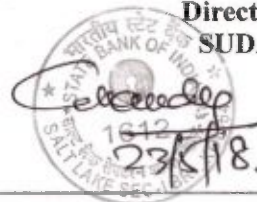


(Petrus Anuranjan Soreng)
 Finance Officer
 SUDA



(Sutanu Prasad Kar)
 Director
 SUDA

Encl. : As stated above.



দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

1. Photograph - 1 copy each
2. Pan Card Xerox - 1 copy each (SUDA)
3. Resolution -
4. Address proof -
5. KYC - of Signatories → Aadhar
Pan

Government of West Bengal
Department of Urban Development & Municipal Affairs
'Nagarayan', DF-8, Sector-I,
Salt Lake City, Kolkata - 700 064

No. 375/MA/P/C-10/3S-21/2018

Dated, Kolkata, the 22nd day of March, 2018

From : Special Secretary to the Government of West Bengal

To : The Director,
State Urban Development Agency,
ILGUS Bhavan, Block HA, Sector III, Salt Lake
Kolkata 700 106

FO for n/a
Sax
22/3/18

Sub: Opening of a Separate Bank Account for SUH under DAY-NULM

Ref. U.O. No. SUDA 100/18 dated 21.02.2018 (File No. 75/2014 (Pt))

Sir,

With reference to above, I am directed to state that a Current Bank Account may be opened with a Nationalized Bank in favour of SUDA for keeping fund for Shelter for Urban Homeless under DAY-NULM subject to observance of all rules and procedure as stipulated in FD Memo 675-F dt. 22.01.08.

This is issued with concurrence of finance Department vide U.O. No. Group T/2017-2018/1134 dated 19.03.2018.

Yours faithfully,

[Signature]
Special Secretary to the Government of West Bengal

No.375/1/MA/P/C-10/3S-21/2018

Dated, Kolkata, the 22nd day of March, 2018

Copy forwarded for information to;

Shri S.Das, WBCS (Exe.), Joint Secretary, UDMA Department

[Signature]
Special Secretary

Netaji Sunder
CC to
M. go for nationalized
bank.
23-03-18



Director, SUDA <wbsudadir@gmail.com>

DP
sa

Opening of Bank Account under DAY-NULM

1 message

Joint Secretary MA & UD Department <jsudmadeptt@gmail.com>
To: "Director, SUDA" <wbsudadir@gmail.com>

Thu, Mar 22, 2018 at 1:06 PM

FO
29/3/18

--
- Regards

Special Secretary
Urban Development & Municipal Affairs Department

Opening of Bank Account under DAY-NULM.pdf
49K

Opening of Bank Account under DAY-NULM

Joint Secretary MA & UD Department <jsudmadeptt@gmail.com>
To: "Director, SUDA" <wbsudadir@gmail.com>

--
- Regards

Special Secretary
Urban Development & Municipal Affairs Department

Opening of Bank Account under DAY-NULM

Government of West Bengal
Department of Urban Development & Municipal Affairs
'Nagarayan', DF-8, Sector-I,
Salt Lake City, Kolkata – 700 064

No. 375/MA/P/C-10/3S-21/2018

Dated, Kolkata, the 22nd day of March, 2018

From : Special Secretary to the Government of West Bengal

To : The Director,
State Urban Development Agency,
ILGUS Bhavan, Block HA, Sector III, Salt Lake
Kolkata 700 106

Sub: Opening of a Separate Bank Account for SUH under DAY-NULM

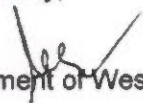
Ref. U.O. No. SUDA 100/18 dated 21.02.2018 (File No. 75/2014 (Pt))

Sir,

With reference to above, I am directed to state that a Current Bank Account may be opened with a Nationalized Bank in favour of SUDA for keeping fund for Shelter for Urban Homeless under DAY-NULM subject to observance of all rules and procedure as stipulated in FD Memo 675-F dt. 22.01.08.

This is issued with concurrence of finance Department vide U.O. No. Group T/2017-2018/1134 dated 19.03.2018.

Yours faithfully,



Special Secretary to the Government of West Bengal

No.375/1/MA/P/C-10/3S-21/2018

Dated, Kolkata, the 22nd day of March, 2018

Copy forwarded for information to;

Shri S.Das, WBCS (Exe.), Joint Secretary, UDMA Department


Special Secretary


No. 375/1/MA/P/C-10/3S-21/2018

Copy forwarded for information to

Shri S.Das, WBCS (Exe.), Joint Secretary, UDMA Department



**Workflow Based File Tracking System
Government of West Bengal
Finance - Group T**

File No : MA/PC-10/3S-21/2018 Subject : Proposal for opening of a Separate bank account for SUH under DAY-NULM. Department : Urban Development	
We may agree to the proposal regarding opening of a Current Bank Account with a Nationalized Bank in favour of SUDA for keeping fund for shelter of Urban Homeless under DAY-NULM subject to observance of all rules and procedure as stipulated in FD Memo 675-F dt. 22/01/08.	
Sd/- Joint Secretary 14.03.2018	
Sd/- Additional Chief Secretary 16.03.2018	
UO NO : Group T/2017-2018/1134 UO Date : 19/03/2018	 Section Officer, Finance Department, Group - 'T' 19/03/2018

*To
UD & MA & Jt. Secy.
19.03.18*

SS (Sudhakar)

20.03.2018

*HA
21/3*

*Suman
22.3.18*

pls put up draft.

21/3/18

सं./No.:

शाखा
Branchशाखा की संख्या
Branch No.दिनांक
Dateसेंट्रल बैंक ऑफ़ इंडिया
Central Bank of Indiaग्राहक पहचान (सीआईएफ) सं.
कार्यालयीन उपयोग हेतु / CIF No. (for office use)

ग्राहक सूचना फार्म (सिर्फ नये गैर-वैयक्तिक ग्राहकों के लिए)

CUSTOMER INFORMATION FORM (FOR NEW NON PERSONAL CUSTOMERS ONLY)

कृपया फार्म को बड़े अक्षरों में भरें, हस्ताक्षर के लिए काले बॉल प्वाइंट पेन का प्रयोग करें, जहां लागू हो, उचित खाने में (✓) लगाएं।
Please fill in CAPITAL letters and use black ball point pen for signature. Please tick (✓) the appropriate boxes.

ग्राहक का फोटोग्राफ
चिपकाएं
AFFIX
PHOTOGRAPH OF THE
CUSTOMER

(1) खाते का नाम / NAME OF THE ACCOUNT:

(2) ग्राहक का प्रकार / CUSTOMER TYPE :

 एकल स्वामित्व
Sole Proprietorship
 भागीदारी फर्म
Partnership Firm
 एल एल पी
LLP
 प्राइवेट लि. कं.
Pvt. Ltd. Co.
 पब्लिक लि. कं.
Public Ltd Co.

 न्यास
Trust
 क्लब/एसोसिएशन/सोसायटी/एसएचजी
Club/Association/Society/SHG
 एचयूएफ
HUF
 स्थानीय निकाय/सरकारी विभाग
Local Bodies/ Govt Dept.
 अन्य (कृपया स्पष्ट करें)
Others (Pl. specify)
(3) ग्राहक पैन/जीआईआर सं.
Customer PAN/GIR No. या/प्रस्तुत फॉर्म 60/61
or/Form 60/61 submitted Y N

(4) पत्र व्यवहार के लिए फर्म, कंपनी, इ. का पता / MAILING ADDRESS OF FIRM, COMPANY ETC. :

मकान/दुकान क्र.
House/Shop No. अपार्टमेंट/बिल्डिंग का नाम:
Apartment/Building Name:मार्ग/गली/लेन:
Road/Street/Lane: पहचान चिह्न:
Landmark:शहर/गाँव:
City/Village: जिला:
District:राज्य:
State: देश:
Country: पिन कोड:
Pin Code:दूरभाष सं. (एसटीडी/आईएसडी कोड के साथ):
Phone No. (With STD/ISD code): फैक्स सं.:
Fax No.:मोबाइल सं.:
Mobile No.: ई-मेल आईडी:
e-mail ID:

(5) फर्म, कंपनी इ. का पंजीकृत पता / REGISTERED OFFICE ADDRESS OF THE FIRM/COMPANY ETC :

मकान/दुकान क्र.
House/Shop No. अपार्टमेंट/बिल्डिंग का नाम:
Apartment/Building Name:मार्ग/गली/लेन:
Road/Street/Lane: पहचान चिह्न:
Landmark:शहर/गाँव:
City/Village: जिला:
District:राज्य:
State: देश:
Country: पिन कोड:
Pin Code:दूरभाष सं. (एसटीडी/आईएसडी कोड के साथ):
Phone No. (With STD/ISD code): फैक्स सं.:
Fax No.:मोबाइल सं.:
Mobile No.: ई-मेल आईडी:
e-mail ID:

(6) राष्ट्रियता / NATIONALITY:

भारतीय:
Indian: अन्य कोई हो, तो स्पष्ट करें:
Other please specify:(7) A) स्थापना की तिथि:
DATE OF ESTABLISHMENT:B) व्यवसाय के प्रारंभ की तिथि:
DATE OF COMMENCEMENT OF BUSINESS:C) ट्रेड लाइसेंस क्र.:
TRADE LICENSE NO.:

(8) निवासी / RESIDENT:

निवासी भारतीय:
Resident Indian: अनिवासी भारतीय:
NRI: अन्य कोई हो, तो स्पष्ट करें:
Other please specify:

साक्षात्कार एवं अपेक्षित ग्राहक संबंधित फार्म (आवेदक/हस्ताक्षरकर्ता के प्रयोग के लिए)
INTERVIEW AND CUSTOMER DUE DILIGENCE FORM (TO BE USED FOR APPLICANT/SIGNATORY)

केवल बैंक प्रयोग हेतु / For Bank use only:

क्रियाकलाप का स्वरूप/LINE OF ACTIVITY			
<input type="checkbox"/> उत्पादन Manufacturing	क्रियाकलाप का प्रकार Nature of Activity	<input type="checkbox"/> व्यापार Trading	वस्तु का प्रकार Nature of Comodity
<input type="checkbox"/> व्यावसायिक Professional	व्यवसाय का स्वरूप Nature of Profession	<input type="checkbox"/> गैर-वाणिज्यिक Non Commercial	क्रियाकलाप का प्रकार Nature of Activity
<input type="checkbox"/> क्या पुरातन वस्तुओं के विक्रेता है? Whether antique dealers?	<input type="checkbox"/> क्या धन सेवा ब्यूरो का कार्य करते हैं? Whether conducting money service Bureau?	<input type="checkbox"/> क्या शस्त्रों के विक्रेता है? Whether dealers in arms?	<input type="checkbox"/> क्या भवन निर्माता या विकासक है? Whether builders or developers?
<input type="checkbox"/> क्या क्रियाकलाप में निर्यात शामिल हैं? यदि हाँ, तो देशों के नाम Whether activity includes export? If Yes, names of countries	<input type="checkbox"/> क्या क्रियाकलाप में आयात शामिल हैं? यदि हाँ, तो देशों के नाम Whether activity includes Import? If Yes, names of countries	<input type="checkbox"/> क्या उच्च शुद्ध मालियत वाले व्यक्ति है? यदि हाँ तो आय/संपत्ति कर विवरणी दें. High Net worth Individuals? If yes, provide Income/Wealth Tax returns	
<input type="checkbox"/> क्या राजनीतिक दल है? Whether political party?	<input type="checkbox"/> क्या बुलियन/जेवरात के विक्रेता है? Whether Bullion/Jewellery Dealers	<input type="checkbox"/> क्या इक्विटी/सट्टेबाजी जैसे क्रियाकलाप करते हैं? Whether trading in equities / speculative activity	
<input type="checkbox"/> क्या कंपनी के पास नजदीकी परिवार की शेयर धारिता अथवा लाभार्जन स्वामित्व है? यदि हाँ, तो अलग कागज पर पूर्ण जानकारी दें. क्या भागीदारी संस्था निष्क्रिय भागीदारों के साथ हैं? यदि हाँ तो अलग कागज पर पूर्ण जानकारी दें./Companies having close family Share holdings or beneficial ownership? If yes, provide details on separate sheet Partnership firms with sleeping partners? If yes, provide details on separate sheet			

सेन्ट्रल बैंक ऑफ इंडिया/अन्य बैंक के साथ खाता/Account with Central Bank/Other Bank Accounts

बैंक Bank	शाखा Branch	खाता का प्रकार Type of Account
बैंक Bank	शाखा Branch	खाता का प्रकार Type of Account

आवेदककर्ता के आय संबंधी जानकारी/Information about Income of the Applicant:

विक्री व्यवसाय टर्नओवर ₹ Sales Business Turnover ₹	वार्षिक आय ₹ Annual Income ₹	शुद्ध मालियत ₹ Net worth
पिछले दो वर्ष में प्रदत्त आयकर Income Tax paid during the last two years	<input type="checkbox"/> < ₹ 10000	<input type="checkbox"/> ₹ 10000 – 50000
	<input type="checkbox"/> ₹ 50000 – 1 lac	<input type="checkbox"/> > ₹ 1 lac

आवेदक की जानकारी/APPLICANT INFORMATION:

एएमएल/AML:

एक वर्ष में अपेक्षित जमा (देशीय/विदेशी) Credit Expected in a year (Inland/Foreign)	<input type="checkbox"/> < ₹ 1 lac	<input type="checkbox"/> < ₹ 5 lac	<input type="checkbox"/> < ₹ 10 lac	<input type="checkbox"/> > ₹ 10 lac
के वाय सी/ए एम एल जोखिम वर्गीकरण KYC/AML risk classification	<input type="checkbox"/> निम्न Low	<input type="checkbox"/> मध्यम Medium	<input type="checkbox"/> बड़ा High	

खाता जानकारी का सत्यापन/Verification of Account Information:

<input type="checkbox"/> पैन की पुष्टि www.Incometaxindia.gov.in वेबसाइट से की गई PAN Verified from www.Incometaxindia.gov.in	<input type="checkbox"/> आवेदक के नाम की जांच संदेहास्पद व्यक्तियों की सूची से करना Applicant's name checked with Suspicious entities list
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------

अधिकारी/शाखा प्रबंधक के निर्णय/Decision of the Officer/Branch Manager

<input type="checkbox"/> आवेदक के वायसी अनुपालनकर्ता हैं The applicant is KYC compliant	<input type="checkbox"/> खाता खोलने की अनुमति दी गई Permitted to open Account	<input type="checkbox"/> बचत खाता Saving Bank Account	<input type="checkbox"/> धातु खाता Current Account	<input type="checkbox"/> मीयादी जमा Term Deposit
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दिनांक
Date

स्थान
Place

अधिकारी/शाखा प्रबंधक के हस्ताक्षर / Signature of Officer/Branch Manager

कार्यालयीन प्रयोग के लिए/FOR OFFICE USE:

- ग्राहक पहचान एवं निवास प्रमाण की प्रतियाँ मूल दस्तावेजों के साथ उनकी जांच की गई तथा बैंक की मुहर और अधिप्रमाणन से प्रमाणित की गई. / Copies of the customer identification and residence proof are cross checked with original documents & certified by putting bank's seal & authentication.
- श्री/सुश्री (अधिकारी) (पदनाम) द्वारा दिनांक / / को आवेदक के स्थान/निवास (आवश्यकता के मामले में) की प्रत्यक्ष जांच की गई/Location/Residence of the applicant (in case of need) has been verified by Mr./Mrs. (officer) (Designation) on / /

अधिकारी / शाखा प्रबंधक का नाम
Name of Officer/Branch Manager

अधिकारी/शाखा प्रबंधक के हस्ताक्षर और इन्डेक्स सं.
Signature of Officer/Branch Manager & Index No.

सं./No.:

शाखा
Branchशाखा की संख्या
Branch No.सेंट्रल बैंक ऑफ इंडिया
Central Bank of Indiaदिनांक
Dateखाता सं.
Account No.प्रथम आवेदक की ग्राहक पहचान (सीआईएफ) सं.
CIF No. of First Applicant
कार्यालयीन उपयोग हेतु/for office use(विद्यमान ग्राहक की सीआईएफ सं. शाखा द्वारा दी जाएगी)
(Existing Customer to fill CIF No, A/c No. will be given by the Branch)

जमा खाता खोलने के लिए फार्म (सिर्फ गैर वैयक्तिक ग्राहकों के लिए)

DEPOSIT ACCOUNT OPENING FORM (FOR NON PERSONAL CUSTOMERS ONLY)

कृपया फार्म को बड़े अक्षरों में भरें, हस्ताक्षर के लिए काले बॉल प्वाइंट पेन का प्रयोग करें, जहां लागू हो, उचित खाने में (✓) लगाएं. • Please fill in CAPITAL letters and use black ballpoint pen for signature. Please tick (✓) the appropriate boxes.

कृपया निम्न जानकारी के अनुसार आप के शाखा में खाता खोलें. • Please open the following account for/me/us at your branch:

<input type="checkbox"/> बचत खाता Saving Bank Account	<input type="checkbox"/> सेंट प्रीमियम Cent Premium	<input type="checkbox"/> चालू खाता Current Account	<input type="checkbox"/> सेंट सिलवर/गोल्ड/डायमंड Cent Silver/Gold/Diamond	<input type="checkbox"/> एमएमडीसी MMDC
<input type="checkbox"/> एफडीआर FDR	<input type="checkbox"/> एमआईडीआर MIDR	<input type="checkbox"/> क्यूआईडीआर QIDR	<input type="checkbox"/> आवर्ती जमा खाता Recurring Deposit	<input type="checkbox"/> सेंट स्व-शक्ति Cent Swa-Shakti
<input type="checkbox"/> अन्य मीयादी जमा योजना Other Term Deposit Scheme				

प्रारंभिक जमा राशि ₹ नकद/चेक सं. (₹) _____ मात्र
With initial deposit ₹ by Cash/Cheque No. _____ (स्वयं द्वारा स्वयं के पक्ष में आहरित करें/Drawn by self, Fvg. Please Write Your Name) onlyअवधि: आवर्ती जमा एवं मीयादी जमा के मामले में _____ दिन _____ माह _____ वर्ष ब्याज दर % _____
Period: In case of Term Deposit & Recurring Deposit Day/s Month/s Year/s at ROI %(1) खाते का नाम: _____
NAME OF THE ACCOUNT:

ग्राहक का प्रकार/CUSTOMER TYPE:

<input type="checkbox"/> एकल स्वामित्व Sole Proprietorship	<input type="checkbox"/> भागीदारी फर्म Partnership Firm	<input type="checkbox"/> एल एल पी LLP	<input type="checkbox"/> प्राइवेट लि. कं. Pvt. Ltd. Co.	<input type="checkbox"/> पब्लिक लि. कं. Public Ltd Co.
<input type="checkbox"/> न्यास Trust	<input type="checkbox"/> क्लब/एसोसिएशन Club/Association/Society/SHG	<input type="checkbox"/> एचयूएफ HUF	<input type="checkbox"/> स्थानीय विभाग/सरकारी विभाग Local Bodies/Govt Dept.	<input type="checkbox"/> अन्य (कृपया स्पष्ट करें) Others (Please specify)

एकल स्वामी/भागीदार/निदेशक/हस्ताक्षरकर्ताओं का विवरण/DETAILS OF SOLE PROPRIETOR/PARTNERS/DIRECTORS/SIGNATORIES:

प्रथम हस्ताक्षरकर्ता: First Signatory सी आई एफ क्र./CIF No. _____ पैन क्र./PAN No. _____

प्रथम नाम/First Name _____ मध्य नाम/Middle Name _____ कुलनाम/अंतिम नाम/Surname/Last Name _____

द्वितीय हस्ताक्षरकर्ता: Second Signatory सी आई एफ क्र./CIF No. _____ पैन क्र./PAN No. _____

प्रथम नाम/First Name _____ मध्य नाम/Middle Name _____ कुलनाम/अंतिम नाम/Surname/Last Name _____

तृतीय हस्ताक्षरकर्ता: Third Signatory सी आई एफ क्र./CIF No. _____ पैन क्र./PAN No. _____

प्रथम नाम/First Name _____ मध्य नाम/Middle Name _____ कुलनाम/अंतिम नाम/Surname/Last Name _____

चतुर्थ हस्ताक्षरकर्ता: Fourth Signatory सी आई एफ क्र./CIF No. _____ पैन क्र./PAN No. _____

प्रथम नाम/First Name _____ मध्य नाम/Middle Name _____ कुलनाम/अंतिम नाम/Surname/Last Name _____

परिचालन का प्रकार एवं अन्य अनुदेश/ MODE OF OPERATIONS & OTHER INSTRUCTIONS

द्वारा खाते का संचालन किया जाएगा और को शेष देय Account will be operated by & Balance payable to	<input type="checkbox"/> मात्र एकल स्वामित्व Sole Proprietor only	<input type="checkbox"/> कोई भी एक भागीदार Any one of the Partners	<input type="checkbox"/> एचयूएफ कर्ता Karta of HUF	<input type="checkbox"/> पी/ए धारक P/A Holder
	<input type="checkbox"/> कोई भी दो निदेशक संयुक्त रूप से Any Two Directors Jointly	<input type="checkbox"/> सचिव एवं कोषपाल संयुक्त रूप से Secretary & Treasurer Jointly	<input type="checkbox"/> संयुक्त रूप से/ Jointly	<input type="checkbox"/> अन्य (कृपया स्पष्ट करें) Any Other (PI Specify)
ब्याज भुगतान अनुदेश Interest Payment Instructions:	<input type="checkbox"/> डाक पते पर बैंकर चेक Bankers Cheque to the mailing address	<input type="checkbox"/> आपके बैंक के बचत/चालू खाते में अंतरित Transfer to Saving/Current account with your Bank		
परिपक्वता पर भुगतान Payment on Maturity:	<input type="checkbox"/> डाक पते पर बैंकर चेक Bankers Cheque/DD to the mailing address	<input type="checkbox"/> आपके बैंक के बचत/चालू खाते में अंतरित Transfer to Saving/Current account with your Bank		
मीयादी जमा नवीकरण अनुदेश Term Deposit Renewal Instructions:	<input type="checkbox"/> कृपया परिपक्वता पर बैंक के नियमानुसार जमा राशि का स्वतः नवीकरण करें/Please auto renew the deposit on maturity as per banks rules.			
मीयादी जमा पर ब्याज पर टीडीएस से छूट हेतु 15एच/15जी प्रस्तुत For exemption from TDS on interest on Term Deposit 15H/15G submitted	<input type="checkbox"/> हां Yes	<input type="checkbox"/> नहीं No	(चालू वित्तीय वर्ष के लिए ही वैध) (valid for current financial year only)	
खाता विवरण का अपेक्षित अंतराल Frequency of Statement of A/c:	<input type="checkbox"/> हररोज़ Daily	<input type="checkbox"/> पाशक Fortnightly	<input type="checkbox"/> मासिक Monthly	<input type="checkbox"/> तिमाही Quarterly
खाता विवरण कैसे भेजा जाए Statement of A/c to be sent by:	<input type="checkbox"/> ई-मेल से e-mail	<input type="checkbox"/> डाक से Post	<input type="checkbox"/> कुरियर से Courier	

नामांकन सुविधाएँ/ NOMINATION FACILITY : डीए-1 / Form DA-1

बैंक जमा राशियों के बाबत बैंककारी अधिनियम, 1949 की धारा 45 झेडए और बैंककारी कंपनी (नामनिर्देशन) नियम 2(1) के अधीन नामनिर्देशन
Nomination under sec.45ZA of the Banking Regulation Act. 1949 and Rule 2(1) of the Banking companies (Nomination) Rules, 1985 in respect of bank deposits.

में/ I _____ नाम
और पते Name(s) and address निम्नलिखित व्यक्ति को नामनिर्दिष्ट करता/करती हूँ जिसको मेरी / अवयस्क की मृत्यु की दशा में, जमा राशि जिसका विवरण नीचे दिया गया है। nominate
the following person to whom in the event of my/minor's death the amount of the deposit, particulars whereof are given below may be returned / सेन्ट्रल बैंक
ऑफ इंडिया /by Central Bank of India _____ शाखा/Branch द्वारा लौटा दी जाए।

जमा का स्वरूप Nature of Deposit		खाता सं. Account No.	
शीर्षक/Title	नामिती का नाम Name of nominee*-		

प्रथम नाम/First Name	मध्य नाम/Middle Name	कुलनाम/Surname
नामिती की आयु Age of the Nominee	वर्ष Year	जमाकर्ता के साथ सम्बंध: Relationship with Depositor:

नामिती का पता Address of the nominee

दूरभाष सं.: Phone No.:	मोबाईल सं.: Mobile No.:
ई-मेल आईडी: e-mail ID:	

* चूंकि आज (जन्म तिथि ___/___/___) पर नामिती अवयस्क है, मैं _____ श्री/श्रीमती _____
को नामिती के अवयस्क के दौरान मेरी/अवयस्क की मृत्यु होने पर, नामिती की ओर से, जमा राशि प्राप्त करने के लिए नियुक्त करता/करती हूँ।

*As the Nominee is minor (Date of Birth- ___/___/___) on this date I _____ nominate
Mr/Mrs _____ to receive the amount of deposit in the event of my/minor's death during the
minority of the Nominee.

स्वामी के हस्ताक्षर/Signature of Proprietor

नामांकन हेतु अधिस्वीकृति/ACKNOWLEDGEMENT FOR NOMINATION

जमा खाता संख्या _____ के बारे में _____ से नामांकन करने हेतु
नामांकन डीए-1 फार्म दिनांक ___/___/___ को प्राप्त हुआ। (जमाधारक/कों/के नाम)

Received on ___/___/___ nomination DA-1 for making nomination from _____
in respect of Deposit A/c.No. _____ (Name of deposit holder/s)

नामांकन पंजीयन सं. /Nomination Registration No. _____
प्राधिकृत हस्ताक्षरकर्ता / Authorised Signatory

सं./No.:

शाखा Branch
शाखा की संख्या Branch No.



सेन्ट्रल बैंक ऑफ़ इंडिया
Central Bank of India



ग्राहक पहचान (सीआईएफ) नं.
कार्यालयीन उपयोग हेतु / CIF No. (for office use)

ग्राहक सूचना फॉर्म (सिर्फ नये वैयक्तिक-व्यक्तिगत ग्राहकों के लिए)

CUSTOMER INFORMATION FORM (FOR NEW PERSONAL INDIVIDUAL CUSTOMERS ONLY)

(1) ग्राहक का प्रकार / CUSTOMER TYPE :

व्यक्तिगत Individual
 कर्मचारी Staff
 भूतपूर्व-कर्मचारी Ex-Staff
 पेंशनभोगी Pensioner
 वरिष्ठ नागरिक Senior Citizen
 रक्षा सेवारत Defence Services
 राजनीतिज्ञ Politician
 अनिवासी भारतीय NRI
 अल्पवयस्क Minor
 अन्य - कृपया स्पष्ट करें Others-Please Specify

सेन्ट्रल केवायसी रजिस्ट्री / अपने ग्राहक को जानिए (केवायसी) आवेदन फॉर्म / वैयक्तिक
CENTRAL KYC REGISTRY / Know Your Customer (KYC) Application Form / Individual

महत्वपूर्ण अनुदेश : IMPORTANT INSTRUCTIONS :

- ए) "*" चिह्न वाले फ़िल्ड अनिवार्य हैं
 बी) कृपया फॉर्म अंग्रेजी के कैपिटल अक्षरों में भरें
 सी) कृपया तिथि-माह-वर्ष फॉर्मेट में भरें
 डी) कृपया अंत में दिए गए खंडवार विस्तृत दिशा निर्देश / अनुदेश पढ़ें
 ई) भारतीय मोटर वाहन अधिनियम 1988 के अनुसार राज्य / वृटी कोड की सूची अंत में उपलब्ध है
 एक) आईएसओ 3166 कंट्री कोड के दो अक्षरों की सूची अंत में उपलब्ध है
 जी) आवेदन के अद्यतन के लिए आवेदन की केवायसी संख्या अनिवार्य है
 एच) किसी विशिष्ट खंड के अद्यतन के लिए, खंड संख्या के पूर्व में दिए गए बॉक्स में टिक (✓) करें एवं बिन खंडों का अद्यतन अर्थात् नहीं है उन्हें काट दें
 A) Fields marked with "*" are mandatory fields.
 B) Please fill the form in English and in BLOCK letters.
 C) Please fill the date in DD-MM-YYYY format.
 D) Please read section wise detailed guidelines/ instructions at the end.
 E) List of State / U. T. code as per Indian Motor Vehicle Act, 1988 is available at the end
 F) List of two character ISO 3166 country codes is available at the end.
 G) KYC number of applicant is mandatory for update application.
 H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated

कार्यालय उपयोग के लिए (वित्तीय संस्थान द्वारा भरा जाय)
 For office use only (To be filled by financial institution)
 आवेदन का प्रकार Application Type* नया New अद्यतन Update
 केवायसी संख्या KYC Number
 खाते का प्रकार Account Type सामान्य Normal सरलीकृत (कम जोखिम ग्राहकों के लिए) Simplified (for low risk customers) छोटा Small
 (केवायसी अद्यतन अनुरोध के लिए अनिवार्य) (Mandatory for KYC update request)

1. वैयक्तिक का विवरण (कृपया अंत में दिए गए अनुदेश ए का संदर्भ लें) / PERSONAL DETAILS (Please refer instruction A at the end)

उपसर्ग / Prefix	प्रथम नाम / First Name	मध्य नाम / Middle Name	अंतिम नाम / List Name
नाम (आईडी साक्ष्य के अनुरूप) Name* (Same as ID proof)			
विवाह पूर्व नाम (यदि कोई है) Maiden Name (If any*)			
पिता / पति/पत्नी का नाम Father / Spouse Name*			
माता का नाम Mother Name*			
जन्म तिथि Date of Birth*			
लिंग Gender*	<input type="checkbox"/> एम-पुरुष M-Male	<input type="checkbox"/> एफ-स्त्री F-Female	<input type="checkbox"/> ट्रांस-जेंडर T-Transgender
वैवाहिक स्थिति Marital Status*	<input type="checkbox"/> विवाहित Married	<input type="checkbox"/> अविवाहित Unmarried	<input type="checkbox"/> अन्य Others
नागरिकता Citizenship*	<input type="checkbox"/> आई एन-भारतीय IN-Indian	<input type="checkbox"/> अन्य (आईएसओ 3166 कंट्री कोड) Others (ISO 3166 Country Code)	
आवासीय स्थिति Residential Status*	<input type="checkbox"/> वैयक्तिक निवासी Resident Individual	<input type="checkbox"/> अनिवासी भारतीय Non Resident Indian	<input type="checkbox"/> भारतीय मूल के निवासी Person of Indian Origin
व्यवसाय का प्रकार Occupation Type*	<input type="checkbox"/> एस-नौकरी S-Service <input type="checkbox"/> निजी क्षेत्र Private Sector	<input type="checkbox"/> सार्वजनिक क्षेत्र Public Sector	<input type="checkbox"/> सरकारी क्षेत्र Government Sector
	<input type="checkbox"/> ओ-अन्य O-Others <input type="checkbox"/> व्यावसायिक Professional	<input type="checkbox"/> स्व रोजगार Self Employed	<input type="checkbox"/> सेवानिवृत्त Retired <input type="checkbox"/> गृहणी Housewife <input type="checkbox"/> छात्र Students
	<input type="checkbox"/> बी-व्यवसाय B-Business <input type="checkbox"/> एक्स-श्रेणीकृत नहीं X-Not Categorised	<input type="checkbox"/> निर्माण Manufacturing	<input type="checkbox"/> व्यापारिक सेवाएँ Trading Services <input type="checkbox"/> खुदरा व्यापार Retail Business
		<input type="checkbox"/> स्टॉक ब्रोकर Stock Broker	<input type="checkbox"/> स्थावर संपदा Real Estate <input type="checkbox"/> पेंशनभोगी Pensioner <input type="checkbox"/> कृषि Agriculture <input type="checkbox"/> कृषि-संबद्ध Agri-Allied



2. यदि तथ्य हो तो टिक करें (कर उद्देश्य के लिए आवास भारत के बाहर हो (कृपया अंत में दिए गए अनुदेश बी का संदर्भ लें)
2. TICK IF APPLICABLE (RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end)

अतिरिक्त अपेक्षित विवरण (केवल खंड 2 के टिक होने पर अनिवार्य)
 ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)
 निवासी के अधिकारी क्षेत्र के आईएसओ 3166 कंट्री कोड
 ISO 3166 Country Code of Jurisdiction of Residence*
 कर पहचान संख्या अथवा उसके समान (यदि अधिकार क्षेत्र द्वारा जारी किया गया हो)
 Tax Identification Number or equivalent (If issued by jurisdiction)*
 जन्म स्थान / शहर का नाम
 Place / City of Birth* जन्म को आईएसओ 3166 कंट्री कोड
 ISO 3166 Country Code of Birth*

फॉर्म 60/61 (आईटी एक्ट)
Form 60/61 (IT Act) : Y N

3. पहचान का साक्ष्य (पीओआई) (कृपया अंत में दिए गए अनुदेश सी का संदर्भ लें)
3. PROOF OF IDENTITY (PoI)* (Please refer instruction C at the end)

(पहचान के साक्ष्य के लिए निम्नलिखित में से किसी भी एक की सत्यापित प्रति प्रस्तुत करना आवश्यक)
 (Certified copy of any one of the following Proof of identity (PoI) needs to be submitted)
 ए-पासपोर्ट संख्या A- Passport Number
 बी-वोटर आईडी कार्ड B- Voter ID Card
 सी-पैन कार्ड C- PAN Card
 पासपोर्ट की समाप्ति तिथि
 Passport Expiry Date DD MM YYY Y
 डी-ड्राइविंग लाइसेंस D- Driving Licence
 ड्राइविंग लाइसेंस की समाप्ति तिथि
 Driving Licence Expiry Date DD MM YYY Y

सी/No.:


सेंट्रल बैंक ऑफ़ इंडिया
Central Bank of India

1911 से आज़क़ लिए "केन्द्रित"

"CENTRAL TO YOU SINCE 1911"


 ग्राहक पहचान (पीओआई) सी.
 कार्यालयीन उपयोग हेतु / CIF No. (for office use)

ग्राहक सूचना फार्म (सिर्फ नये वैयक्तिक-व्यक्तिगत ग्राहकों के लिए)

CUSTOMER INFORMATION FORM (FOR NEW PERSONAL INDIVIDUAL CUSTOMERS ONLY)
(1) ग्राहक का प्रकार / CUSTOMER TYPE:

<input type="checkbox"/> व्यक्तिगत Individual	<input type="checkbox"/> कर्मचारी Staff	<input type="checkbox"/> पूर्व-कर्मचारी Ex-Staff	<input type="checkbox"/> पेंशनभोगी Pensioner	<input type="checkbox"/> वरिष्ठ नागरिक Senior Citizen
<input type="checkbox"/> रक्षा सेवारत Defence Services	<input type="checkbox"/> राजनीतिज्ञ Politician	<input type="checkbox"/> अनिवासी भारतीय NRI	<input type="checkbox"/> अल्पवयस्क Minor	<input type="checkbox"/> अन्य - कृपया स्पष्ट करें Others-Please Specify

सेंट्रल केवायसी रजिस्ट्री / अपने ग्राहक को जानिए (केवायसी) आवेदन फॉर्म / वैयक्तिक

CENTRAL KYC REGISTRY / Know Your Customer (KYC) Application Form / Individual
महत्वपूर्ण अनुदेश : IMPORTANT INSTRUCTIONS :

- ए) "*" चिह्न वाले फ़िल्ड अनिवार्य हैं
 बी) कृपया फॉर्म अंग्रेजी के कैपिटल अक्षरों में भरें।
 सी) कृपया तिथि-माह-वर्ष फॉर्मेट में भरें।
 डी) कृपया अंत में दिए गए खंडवार विस्तृत विज्ञापन / अनुदेश पढ़ें।
 ई) भारतीय मोटर वाहन अधिनियम 1988 के अनुसार राज्य / यूटी कोड की सूची अंत में उपलब्ध है।
 एफ) आईएसओ 3166 कंट्री कोड के दो अक्षरों की सूची अंत में उपलब्ध है।
 जी) आवेदन के अद्यतन के लिए आवेदन की केवायसी संख्या अनिवार्य है।
 एच) किसी विशिष्ट खंड के अद्यतन के लिए, खंड संख्या के पूर्व में दिए गए बॉक्स में टिक (✓) करें एवं बिना खंडों का अद्यतन अपेक्षित नहीं है उन्हें काट दें।
- A) Fields marked with "*" are mandatory fields.
 B) Please fill the form in English and in BLOCK letters.
 C) Please fill the date in DD-MM-YYYY format.
 D) Please read section wise detailed guidelines/ instructions at the end.
 E) List of State / U.T. code as per Indian Motor Vehicle Act. 1988 is available at the end.
 F) List of two character ISO 3166 country codes is available at the end.
 G) KYC number of applicant is mandatory for update application.
 H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated

कार्यालय उपयोग के लिए (वित्तीय संस्थान द्वारा भरा जाय) For office use only (To be filled by financial institution)	आवेदन का प्रकार Application Type*	<input type="checkbox"/> नया New	<input type="checkbox"/> अद्यतन Update
	केवायसी संख्या KYC Number	<input type="text"/>	
	खाते का प्रकार Account Type	<input type="checkbox"/> सामान्य Normal	<input type="checkbox"/> सरलीकृत (कम जोखिम ग्राहकों के लिए) Simplified (for low risk customers)
		<input type="checkbox"/> छोटा Small	

(केवायसी अद्यतन अनुरोध के लिए अनिवार्य)
(Mandatory for KYC update request)

1. वैयक्तिक का विवरण (कृपया अंत में दिए गए अनुदेश ए का संदर्भ लें) / PERSONAL DETAILS (Please refer instruction A at the end)

नाम (आईडी साक्ष्य के अनुरूप) Name* (Same as ID proof)	उपसर्ग / Prefix	प्रथम नाम / First Name	मध्य नाम / Middle Name	अंतिम नाम / List Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
विवाह पूर्व नाम (यदि कोई है) Maiden Name (if any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
पिता / पति/पत्नी का नाम Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
माता का नाम Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
जन्मतिथि Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
लिंग Gender*	<input type="checkbox"/> एम-पुरुष M-Male	<input type="checkbox"/> एफ-स्त्री F-Female	<input type="checkbox"/> ट्री-ट्रान्सजेन्डर T-Transgender	फोटो / PHOTO
वैवाहिक स्थिति Marital Status*	<input type="checkbox"/> विवाहित Married	<input type="checkbox"/> अविवाहित Unmarried	<input type="checkbox"/> अन्य Others	
नागरिकता Citizenship*	<input type="checkbox"/> आई एन-भारतीय IN-Indian	<input type="checkbox"/> अन्य (आईएसओ 3166 कंट्री कोड) Others (ISO 3166 Country Code)	<input type="text"/>	
आवासीय स्थिति Residential Status*	<input type="checkbox"/> वैयक्तिक निवासी Resident Individual	<input type="checkbox"/> अनिवासी भारतीय Non Resident Indian	<input type="checkbox"/> भारतीय मूल के निवासी Person of Indian Origin	
व्यवसाय का प्रकार Occupation Type*	<input type="checkbox"/> एस-नौकरी S-Service	<input type="checkbox"/> निजी क्षेत्र Private Sector	<input type="checkbox"/> सार्वजनिक क्षेत्र Public Sector	
	<input type="checkbox"/> ओ-अन्य O-Others	<input type="checkbox"/> व्यावसायिक Professional	<input type="checkbox"/> स्व रोजगार Self Employed	
	<input type="checkbox"/> बी-व्यवसाय B-Business	<input type="checkbox"/> निर्माण Manufacturing	<input type="checkbox"/> व्यापारिक सेवाएं Trading Services	
	<input type="checkbox"/> एक्स-श्रेणीकृत नहीं X-Not Categorized	<input type="checkbox"/> स्टॉक ब्रोकर Stock Broker	<input type="checkbox"/> सेवाविशेष Retired	
		<input type="checkbox"/> सरकारी क्षेत्र Government Sector	<input type="checkbox"/> गृहणी Housewife	
		<input type="checkbox"/> स्व रोजगार Self Employed	<input type="checkbox"/> छात्र Students	

2. यदि लागू हो तो टिक करें (कर उद्देश्य के लिए आवास भारत के बाहर हो (कृपया अंत में दिए गए अनुदेश बी का संदर्भ लें)

2. TICK IF APPLICABLE (RESIDENCE FOR TAX PURPOSES OUTSIDE INDIA (Please refer instruction B at the end)

अतिरिक्त अपेक्षित विवरण (केवल खंड 2 के टिक होने पर अनिवार्य)
ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)निवासी के अधिकारी क्षेत्र के आईएसओ 3166 कंट्री कोड
ISO 3166 Country Code of Jurisdiction of Residence*

फॉर्म 60/61 (आईटी एक्ट)
 Form 60/61 (IT Act):

Y N

कर पहचान संख्या अथवा उसके समान (यदि अधिकार क्षेत्र द्वारा जारी किया गया हो)
Tax Identification Number or equivalent (If issued by jurisdiction)*

जन्म स्थान / शहर का नाम
Place / City of Birth*

जन्म को आईएसओ 3166 कंट्री कोड
ISO 3166 Country Code of Birth*

3. पहचान का साक्ष्य (पीओआई) (कृपया अंत में दिए गए अनुदेश सी का संदर्भ लें)

3. PROOF OF IDENTITY (PoI)* (Please refer instruction C at the end)

(पहचान के साक्ष्य के लिए निम्नलिखित में से किसी भी एक की सत्यापित प्रति प्रस्तुत करना आवश्यक)
(Certified copy of any one of the following Proof of identity (PoI) needs to be submitted)

<input type="checkbox"/> ए-पासपोर्ट संख्या A- Passport Number	<input type="text"/>	पासपोर्ट की समाप्ति तिथि Passport Expiry Date	DD	MM	YY	YY
<input type="checkbox"/> बी-वोटर आईडी कार्ड B- Voter ID Card	<input type="text"/>	डी-डाइविंग लायसेंस D- Driving Licence	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> सी-पैन कार्ड C- PAN Card	<input type="text"/>	डाइविंग लायसेंस की समाप्ति तिथि Driving Licence Expiry Date	DD	MM	YY	YY

ACCOUNT OPENING FORM

Sole Prop. Concern/ Partnership Firm/Companies/Limited Liability Partnership(LLP)Firm Co./Trust/ Societies / Co-Operative Bank/HUF OR SIMILAR BODIES
Instructions: 1.PNB 1228 (CUSTOMER MASTER FORM / KNOW YOUR CUSTOMER (KYC) /CKYCR FORM FOR INDIVIDUALS) must be taken (where KYC NUMBER is not existing) with this form for new accounts.

Branch office..... FOR CRM LEAD NUMBER IN CBS (To be filled by Bank)
 Dist. No.....

CRM Lead Number									
For B.O.	Lead No. entered in CBS	Yes							
Signature									

Customer ID. No. (To be Filled by bank)																			
Account No. 16 digit (To be Filled by bank)																			

1. Name & style of the A/c M/s.

Sole proprietor	Partnership	Company	LLP	Trust	Society	HUF	others (specify)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

2. Date of Incorporation*																			

3. PAN/GIR NO

3. We request you to open the following account. I/we agree to be bound by the bank's rules in force from time to time.
 (Tick the relevant box on right side). (To be filled in Block letters)

(A) Savings Fund Account (specify)	(B) PNB Prudent Sweep SF (Sweep In and Out Facility Required for.....days)	(C) Current Account
(D) PNB Smart Roamer Current Account (Sweep in and Out)	(E) Recurring Deposit Monthly Installment Rs..... No. of Installments..... Interest rate.....%	(F) Others(Specify)
(G)Overdraft/Cash Credit	(H) Term Deposit (FD)* Anupam / Sugam/Tax saver/other FDs(specify)	

#Amount Rs..... Period: Year..... Months..... Days..... Interest Rate :.....%

Interest payment frequency (Pl. tick in the appropriate box)	On maturity	Annually	Half Yearly	Quarterly	Monthly	Credit interest/ maturity proceeds to SF /CA/CC/OD Account No.....
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

TDS DETAILS

TDS if applicable: Yes No if no, exemption reference

If Yes, Whether Form15G/H* submitted : YES NO

*Form 15G for General category & 15H for Senior Citizen

Instruction for Auto Renewal on maturity of deposit (Tick the relevant column)	Renew for Principal & Interest	Renew for Principal only	Period for which Auto renewal required : No. of times.....
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

4. ADDRESS : I) OFFICE ADDRESS

a) Whether : Permanent address Current address Overseas address Details *

b) Address Type : A. Residential/Business B. Residential C. Business/Office D. Registered Office E. Unspecified (Factory/ Godown)

c) Proof of Address..... A. Certificate of Incorporation/Formation B. Registration Certificate

(For details Refer ANNEXURE - II. Customer Identification Procedure)

City/Town/village																			
State/UT																			Code
Pin/Post Code																			
Register Mobile No																			Tel (Landline (STD)
Registered Email Id																			
Name of Contact Person																			

(All communications will be sent on provided registered mobile & E-mail Id)

ii). BUSINESS/WORK/FACTORY/ GODOWN ADDRESS:

a) Address Type : A. Residential/Business B. Residential C. Business D. Registered Office E. Unspecified

b) Whether Permanent address Current address Overseas address

c) Proof of Address : A. Certificate of Incorporation/Formation B. Registration Certificate
 (For details Refer ANNEXURE - II. Customer Identification Procedure)

City/Town/village																						
State/UT																						
Pin/Post Code																						
Register Mobile No																						
Registered Email Id																						
Name of Contact Person																						

5. Name and Capacity of Sole Proprietor/partners/Directors/Trustees etc

S.N.	Name (Mr./Ms)	Capacity	A/C no. with our bank/ branch, if any, in his personal name	Cust - ID of the a/c mentioned in previous column
1.				
2.				
3.				
4.				
5.				

Note - Each person mentioned above should be KYC compliant and should have a separate Cust -ID in his individual name. If he is not an existing account holder, he should obtain his Cust ID from the branch by filling up the form for individual customers. Opening an account in his individual name is not necessary.

6. Whether firm/company/trust is already having Deposit a/c with PNB/other bank. Yes No If yes, Please give details

Nature of Account	Account No.	Name of Bank & Branch

6a). Whether firm/company/trust is already enjoying any credit facility with any other bank / any other branch of PNB Bank. Yes No
 If YES, Please give details

Nature of Credit facility	Account No.	Amt. of Loans	Name of Bank & Branch

If NO, Please give declaration

That I / We am / are not enjoying any credit facility with any other bank / any other branch of your Bank and I / we undertake to inform you, in writing, as soon as any credit facility is availed of by me / us from any other bank / any other branch of your Bank."

7. Specify purpose of opening the account

8. Nature/ type of business activity

Antique dealer Money Service Bureau Casino Arms dealer etc. Political party
 Jeweller, dealer in bullions/diamonds/precious metals Real estate dealer Share market broker
 Commission agent Aahratia Hotelier Travel agent Transporter etc.

Firm/company/trust running Hospital, Nursing Home, Law Firm etc.
 Doctors Lawyers Architects/engineers Chartered accountants Other Profession
 If other than above, please specify business activity :

9. NOMINATION REQUIRED: YES NO If Yes, please fill in the following particulars
(For Sole Prop. Concern only)

I/we, nominate the following person particulars whereof are given below to whom in the event of my/our/minor's death the amount of the deposit in the account opened with this AOF may be returned by the bank.

Nominee				
Name	Address	Relationship with depositor, if any	Age	If nominee is a minor, his date of birth

As the nominee is a minor on this date, I/we appoint Shri/Smt.
(Name, address and age) to receive the amount of the deposit on behalf of the nominee in the event of my/our/ minor's death during the minority of the nominee. @Where the deposit is made in the name of minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor.

SIGNATURE(s)

Witnesses for nomination (for Thumb Impression only)

Name & Signature of the first witness	Name & Signature of Second witness
Name Signature:	Name Signature:
Address:	Address:

10. Annual Turnover / Receipt Rs. _____

Whether documentary proof in support provided : YES NO

If yes, type of Proof : Balance Sheet Income-tax Return Sales Tax Return

Excise Return Other (Specify) _____

11. Total expected annual credits in account Rs. (in lacs) of which in cash Rs. (in lacs)
Justification of turnover

12. Whether Partnership Firm/Trust/Society/Club/ Co-operative Bank/Limited Liability Partnership (Tick appropriate box)

is : Registered OR Un-registered

If, registered, registration certificate enclosed: Yes/No If Yes, Registration no _____ date of issue _____
& Issuing Authority _____

If no, I/we hereby declare as under (tick the following): Applicable in case of Partnership Firms/Limited Liability Partnership

There is no written partnership deed executed among us so far and we undertake to furnish one copy to the Bank as and when it is executed.	A written partnership deed has been executed among us but we do not want to disclose its contents. We, however, affirm that there is nothing in the said deed repugnant to the stipulations we have made herein.
--------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

13. True copy of Certificate of Incorporation enclosed : Y N

14. True copy of Constitution Rules and Regulations/ Memorandum and Article of Association Enclosed : Y N

15. True copy of Certificate of Commencement of Business enclosed *(required in case of Limited Companies) : Y N

16. True copy of Resolution of the Board of Directors/ Managing Committee/ Executive Committee or other Governing bodies Regulating the conduct of the account together with specimen Signatures of the authorized signatories enclosed : Y N

17. Name of Sole proprietor /Partners/Authorized Persons authorized to operate the account

S.No.	Designation	Name: (Mr /Ms)
1		
2		
3		
4		
5		

18. We attach the following documents in respect of the Firm/ Company/ Trust/ Society/ Club: (Please refer to list -Ann-II)

- (A) For Identity Proof
 (B) For Address Proof
 (C) Other Documents (i) (ii)
 (iii) (iv)

(For details Refer ANNEXURE - II. Customer Identification Procedure)

19. REQUEST: I/We wish to avail the following facility(ies)

i	Please issue Pass Book: <input type="checkbox"/> OR Statement of account: <input type="checkbox"/> (on registered E-mail)	
ii	Cheque book facility	Yes/No
iii	Debit Card	Yes/No
iv	Internet banking in my /our account as per detail below	Yes/No
v	Mobile banking facility on registered mobile	Yes/No
vi a)	SMS alerts: (Mandatory SMS Free) Other SMS which are Chargeable	Yes/No
vi b)	SMS language Choice : English <input type="checkbox"/> Hindi <input type="checkbox"/> Others <input type="checkbox"/>	
vii	Credit Card facility (Subject to 6 months satisfactory conduct of account)	Yes/No
viii	Cash Management Service Facility	Yes/No
ix	Door Step Banking Facility	Yes/No
x	POS terminal facility required	Yes/No

20. DEBIT CARD: (Applicable for sole proprietor only) I/we may please be Issued Debit Card as per following details. I/we have read the terms and conditions governing the use of DEBIT card.

Name of 1 st Card holder																			
Name of 2 nd Card holder																			
Name of 3 rd Card holder																			

Nomination for DEBIT CARD holder (For Compensation on Accidental Insurance) : (delete whichever is not applicable)

i) I/We hereby
 nominate Mr./Ms..... S/D/W/O
 R/O aged..... Years to receive the money

Payable by the Insurance Company in the event of my/our death. I further declare that his/her receipt shall be sufficient discharge to the bank.

(ii) As the nominee is minor on this date, I / we appoint Mr./Ms
 S/D/W/O R/O
 aged..... Years to receive the money on behalf of
 nominee during the minority of nominee.

21. Internet Banking: I/we may please be allowed Internet Banking as per the following details. I/we have read the terms and conditions governing the use of internet Banking.

i). Name of the account holder(s) authorized for using internet banking services :

- a..... b

A Viewing facility: 1st 2nd 3rd applicant B. Transaction facility: 1st 2nd 3rd applicant

ii). Account numbers on which internet banking services are required (in case the customer has more than one account with Bank)

Main Account No																			
2 nd Account No																			
3 rd Account No																			

(In case of subsequent change of authorization, separate form should be obtained)

22. FATCA/CRS SELF CERTIFICATION / DECLARATION FOR ENTITY (FORM PNB 1230 MANDATORY TO BE FILLED BY ALL THE ENTITIES- EXCLUDING SOLE PROPRIETORS)

22.1. FATCA/CRS SELF CERTIFICATION / DECLARATION FOR Sol Prop. Concern only *

A) Are you a tax resident of any country other than India? Yes No

If yes, please fill the details below: at 22.1(a) & Sign below at 22.1(b)

If No, please sign the declaration Certification below at 22.1(b)

22.1. (a)(Please indicate all countries in which you are resident for tax purposes and associated details)

1.Country/ (ies) of Tax residency #	ISO 3166 Country code of jurisdiction of residence*	Tax Identification Number (TIN)*or Equivalent	Identification Type (TIN or Other*; please specify)	Residence Address for Tax purpose (including City, State, Country and Pin code)	Address Type: 1- Residential or Business, 2- Residential, 3-Business, 4-Registered Office
Place/City of Birth*					ISO 3166 Country code of Birth

* To also include USA, where the individual is a citizen/ green card holder of USA

* In case Tax Identification Number is not available, kindly provide functional equivalent!

22.1(b) Certification

Under penalty of perjury, I certify that: I understand that Punjab National Bank is relying on this information for the purpose of determining the status of the account holder named above in compliance with FATCA/CRS. Punjab National Bank is not able to offer any tax advice on FATCA or CRS or its impact on the account holder. I shall seek advice from professional tax advisor for any tax questions.

I agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.

I agree that as may be required by domestic regulators/tax authorities, Punjab National Bank may also be required to report, reportable details to CBDT or other authorities/agencies or close or suspend my account, as appropriate.

I have understood the information requirements of this Form (read along with the FATCA/CRS Instructions) and hereby confirm that the information provided by me on this Form including the taxpayer identification number is true, correct, and complete. I also confirm that I have read and understood the FATCA/CRS Terms and Conditions and hereby accept the same.



Signature(s) / Thumb Impression of Applicant

23. For HUF: Our joint family is composed of the signatories hereof and the minor Co-parceners named

1 For Self and as Karta of Joint Hindu Family Known as -

Karta: (Name):.....

Major co-parceners (Name)

- 1.
- 2.
- 3.
- 4.

Minor co-parceners with their Father's names and dates of birth

- 1.....
- 2.....
- 3.....
- 4.....

(In case of more account holders, please attach a separate sheet giving name & signature)

24. We declare that above particulars are correct

S.No.	Name	Capacity	Signature with rubber stamp
1			
2			
3			

Date:.....

Place:.....

1st Authorized Person Recent Photo with signature across photo

2nd Authorized Person Recent Photo with signature across photo

3rd Authorized Person Recent Photo with signature across photo

Name of Account																
Account Number																
Cust ID of Account																
1 st Authorized Person Name:	Specimen signature/ Thumb Impression				Specimen signature/ Thumb Impression				(For official use) Signature verified							
Customer Id																
2 nd Authorized Person Name:	Specimen signature/ Thumb Impression				Specimen signature/ Thumb Impression											
Customer Id																
3 rd Authorized Person Name:	Specimen signature/ Thumb Impression				Specimen signature/ Thumb Impression				Name:							
Customer Id																
													Date :			

24. Mode of operation (tick whichever is applicable)

Sole-Proprietor	<input type="checkbox"/>	Any Partner	<input type="checkbox"/>	All the partners/Jointly	<input type="checkbox"/>	Authorized Persons	<input type="checkbox"/>	Any Other (please Specify)	<input type="checkbox"/>
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FOR BRANCH USE ONLY

Risk Category: High Risk Medium Risk Low Risk Negligible Risk

	Name	Signature	GBPA/PF no.	Date
1. Signature (s) verified by				
2. Information entered in the system				
3. Entered Information Verified by				
4. Account opening Authorized, copies of documents obtained verified, Customers name checked with the barred list and Risk category verified by				
	ATM-cum-Debit Card no.	(Internet Issued Mention User ID)	Cheque Book Issued No. From: to	
Date of issue				
Issued by (Signature with GBPA/SPA no.)				

Annexure – I. DECLARATION/INSTRUCTIONS/GUIDELINES

1. SOLE PROPRIETORSHIP CONCERN

- I hereby declare that I, the undersigned, am the sole proprietor of the aforesaid concern and that all dealings and transactions are being entered into by me as its sole-proprietor or by authorized representative. No other individual or party is sharing with me in my business styled as above.
- All cheques, orders and communication in connection with the said account will be signed by me or by the authorized representative.
- I request and authorize you to honour all such cheques, orders and communications in connection with said account with you irrespective of whether such account be for the time being in credit or overdrawn.

2. PARTNERSHIP CONCERN

- A copy of the partnership deed/trust deed/ Certificate of incorporation/registration rules and regulation/Memorandum of association/article of association is enclosed.
- In the event of the death, insolvency or withdrawal of any partner, the surviving partner or partners shall have full control on any money then and thereafter standing to the firms' credit and securities pledged, Hypothecated or held in the firms account with you. It is understood that all money now or hereafter standing to the credit of the account of the firm or securities pledge, hypothecated or held in the account with you shall belong to the surviving partners on the event of any of us dying during the currency of the account. It is further understood that if any one of us forbids operation on the account (which is not payable to all the partners jointly), the amount lying at credit shall not be payable except on the discharge by all the partners or the surviving partners as the case may be.
- We undertake to inform you of any change in the constitution of our firm or other terms of the partnership deed which may in any manner affect the existing stipulations governing the operation of our account.

3. GENERAL CONDITIONS

- I/we confirm having received ,read and understood (a)the accounts rules and hereby agree to be bound by the terms & conditions outlined in these rules which governs the account(s) which I/ we am/are opening/ will open with Punjab National Bank and(b) amendments to the rules made from time to time and those relating to various services availed by me/us when displayed by the bank on its notice board or on its website and those relating to various services offered by the Bank including but not limited to Debit card, Credit card, Internet banking, Mobile Banking, SMS alerts and other facilities listed in this form .I/We are aware that the use of these facilities is governed by the terms and conditions which are contained in the brochures of the Bank issued from time to time/displayed on the website www.pnbindia.in, the site maintained by Punjab National bank and I/we have reviewed the contents of the same. I/we understand that the bank may at its absolute discretion discontinue any of the services completely or partially without any notice to me/us. I/We agree that the bank may debit my account for service charges as applicable from time to time. I/We declare that the transactions in the account will be made from legitimate sources only and the account will not be used for any purpose contrary to law. All communications will be sent on provided registered mobile no & E-mail id only.
- I/we also agree to maintain the minimum/quarterly average balance which the Bank may prescribe as the minimum/quarterly average balance to be maintained to avail the facilities and agree to pay the charges if minimum/quarterly average balance is not maintained and any other charges stipulated by the Bank. I/We understand that any change in this respect will be notified by the Bank on its website www.pnbindia.in and also will be displayed on the notice board of the branches one month in advance. I/We undertake to make good the losses to the bank, suffered consequent to crediting in the account proceeds of cheque drawn on other customers' accounts in bank or make good any overdraft created in our account on account of service charges or Debit Card withdrawal or through any other transaction.

I/We hereby declare that the information furnished above is true and correct to the best of my/our knowledge. I/we am/are not availing any credit facilities with any other Bank/branch of your Bank and I/we undertake to inform you in writing as soon as any credit facility is availed by me/us from any other Bank/branch of your Bank or I am availing credit facilities with other Bank(s)/branch (es) of your Bank as per details given in the enclosed sheet.

I/we give my consent to receive information by usual means of communication including phone Banking about PNB' products and or services or promotional offers introduced by the Bank from time to time and also authorize the Bank to use my/our personal information available with the bank for marketing purposes.

- We request and authorize you (i) until any one of us shall give you notice in writing to the contrary to honour all cheques or other orders which may be drawn or bills accepted or notes made or receipts for money owing by you to us signed by us as per mode of operation given above on behalf of our said firm and debit such cheques, orders, bills, notes and receipts to our said firm's account whether such accounts be for the time being in credit or overdrawn (ii) to accept balance confirmation letters signed by any one of us or said Manager for acknowledgement of the balance due to or by you on the above account. These confirmation letters signed by one of us or our said Manger will be binding on the firm (before and after its dissolution and during winding up) as well as on all the Partners/concerned severally (iii) as per mode of operation given above, are authorized to arrange drawing of inland and/or foreign letters of credit and for issuance of letters of

guarantee by the Bank and to sign relative application, counter guarantees and other documents relating thereto draw, accept, endorse and negotiate cheques, hundies, bills of exchange, Promissory Notes and all negotiable instruments or railway receipts or other documents relating to goods lodged for collection or negotiated with the Bank to give receipt for any money, deeds, Securities or other documents of papers or property, etc to give at any time or from time to time indemnities or guarantees or any instructions enter into my transaction or undertake any obligation on behalf of the firm relating to the said account or accounts with the Bank or otherwise, pledge, hypothecate, take delivery or receive from the Bank all goods, securities deeds or documents on behalf of the said firm and given effectual receipt for the same and execute any documents or papers as required by the Bank in that connection.

- Certified copy of the resolution of the Board of Directors dated.....regarding operation of the account is enclosed.
- In case in future, if any change is required in the operation of account, you will be informed accordingly in writing and such persons shall be allowed to operate the account(s)
- I/We undertake to update information provided to the Bank in case of any change (including photograph(s))after opening accounts, which may in any manner affect the existing stipulations governing the operation of our account, as per Bank's guidelines.

4. FATCA/CRS INSTRUCTIONS

- In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA/ CRS Indicia observed (ticked)		Documentation required for Cure of FATCA/ CRS indicia
		If customer does not agree to be Specified U.S. person/ reportable person status
U.S. place of birth	1. Self -certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non -US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents: a. Certified Copy of "Certificate of Loss of Nationality or b. Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth	
Residence/ mailing address in a country other than India or Telephone number in a country other than India (and no telephone number in India provided) or Standing instructions to transfer funds to an account maintained in a country other than India		1. Self -certification (in attached format) that the account holder is not resident for tax purposes in that country; and 2. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*
 2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)
- *Government or agency thereof or a municipality of the country or territory in which the applicant claims to be a resident

Date : _____

Yours Faithfully

Place :

Authorized Person

Annexure – II. Customer Identification Procedure

Documents to be obtained from customers.

Please present originals for verification and produce a photo copy duly signed by the new account holders:

Types of Customers	Description of Documents [A certificate to the effect that self certified copy has been verified from the original must be appended on the self-certified copy of the OVD) and copy verified from the original will be kept on record with AOF].
Accounts of Companies	<p>In addition to KYC documents of the Directors of the company, the following documents should be obtained :</p> <ul style="list-style-type: none"> ▪ Certificate of Incorporation ▪ Certificate of Commencement of Business (in case of Public Ltd Co.) ▪ Memorandum & Articles of Association duly certified by a Director/Secretary as true copy. ▪ A copy of the latest Audited Balance Sheet & Profit and Loss Account in case of Public Ltd. Company. ▪ A resolution from the Board of Directors and power of attorney granted to its managers, officers or employees to transact on behalf. and ▪ An officially valid document in respect of managers, officers or employees holding an attorney to transact on its behalf.
Accounts of Partnership firms	<p>In addition to KYC documents of all partners/authorized persons of the concern, the following documents be obtained :</p> <ul style="list-style-type: none"> ▪ Registration Certificate. ▪ Partnership Deed. ▪ An officially valid document in respect of the person holding an attorney to transact on its behalf.
Accounts of Proprietorship concerns	<p>Proof of the name, address and activity of the concern In addition to KYC documents of the Proprietor, [including recent passport size photograph(s)], any two of the following documents in the name of the proprietary firm:</p> <ul style="list-style-type: none"> ▪ Registration Certificate (in the case of registered concern); ▪ Certificate/licence issued by the Municipal authorities under Shop & E stablishment Act; ▪ Sales and Income Tax Returns ▪ CST/VAT Certificate ▪ Certificate/registration document issued by Sales Tax/Service Tax/Professional Tax authorities ▪ Licence / certificate of practice issued in the name of proprietary concern by any professional body incorporated under statue. The complete income tax return (not just the acknowledgment) in the name of the sole proprietor where the firm's income is reflected, duly authenticated / acknowledged by the Income Tax Authorities. <p>Note: However, in cases where the Bank is satisfied that it is not possible to furnish two such documents in the name of proprietary concern, the Bank may accept only one of the above mentioned documents as activity proof provided that the Bank Under takes contact point verification, collects such information as is required to establish the existence of such firm, confirms, clarifies and satisfies itself that the business activity is verified from the address of the proprietary concern.</p>
Accounts of trusts	<p>In addition to KYC documents of the Managing Trustees/Founders/Managers/ Directors and their addresses, the following documents of Trust are to be obtained:</p> <ul style="list-style-type: none"> ▪ Registration certificate ▪ Trust Deed ▪ An officially valid document in respect of the person holding a power of attorney to transact on its behalf.
Accounts of unincorporated association or a body of individuals	<p>In addition to KYC documents of the Founders/Managers/Directors and their addresses, the following documents of Trust are to be obtained:</p> <ul style="list-style-type: none"> ▪ Resolution of the managing body of such associations or body of individuals. ▪ Power of attorney granted to him to transact on its behalf. ▪ An officially valid document in respect of the person holding an attorney to transact on its behalf. ▪ Copy of Bye Laws
Accounts of Hindu Undivided Family	<p>In addition to KYC documents of Karta and Major Co-parceners, the following documents should be obtained :</p> <ul style="list-style-type: none"> ▪ Declaration of HUF and its Karta ▪ Recent Passport Photographs duly self attested by Karta and major co-parceners. ▪ Names and addresses of Karta and Major Co-parceners. ▪ An officially valid document in respect of the person holding an attorney to transact on its behalf.
Limited Liability Partnership (LLP)	<p>In addition to KYC documents of the partners, the following documents should be obtained from the LLP while opening of account:-</p> <ul style="list-style-type: none"> • LLP Agreement; • Name of at least two Designated Partners including their DPIN (designated partner identification no) issued by Central Govt. • Certificate of Incorporation issued by RoC. • Resolution to open account and operational instructions/mandate to operate the account. • Relevant provisions as mentioned in Partnership firm.

Draft of Resolution to be passed by the Societies/Clubs/Associations/Co operative Banks or Similar Bodies for.....

At a Meeting of Directors of (name of Company) held at.....on the..... day of 20, the following Resolutions (strike whichever not applicable) were passed:

1. Resolved that a Account of the be opened with Punjab National Bank (the Bank).
2. That for the purposes and on behalf of the Company, a Cash Credit/Overdraft Limit of Rs. (Rupees), outstanding at any one time, be arranged with Punjab National Bank on the security of..... and Shri....., for the time being of the Company, be and is hereby authorized to furnish the said securitization (in relation to deposit or withdrawal or otherwise) and to sign and execute on behalf of the Company all documents and forms, as may be required by the Bank.
3. That the Bank be instructed and authorized to pay and honour all cheques or other orders expressed to be drawn on behalf of the company and to accept and act upon receipt of any instructions relating to the account or accounts kept in the name of the company or relating to any transactions of the Company with the Bank, for moneys deposited with or owing by the Bank on the accounts or account at any times kept in the name of the said Company provided such cheques, orders, receipts, bills or notes are signed by..... for the time being in credit or overdrawn and to accept the endorsement of on cheques or other bills or notes payable to the said_
4. That Shri for the time being of the Company be and is hereby authorised to draw, accept, endorse and negotiate cheques, hundies, bills of exchange, promissory notes and all negotiable instruments or railway receipts or other documents, relating to goods lodged for collections or negotiated with the Bank, to sign balance confirmations, to give receipts for any moneys, deeds, securities or other documents or papers or property etc. to give Indemnities or any other instructions, or enter into any transactions on behalf of the Company relating to the said account or accounts with the Bank at anytime.
5. That the Bank be furnished with list of names of the Members/Directors/ Secretary and other Officers of the company for the time being and a copy of its Memorandum and Articles of Association Rules and Regulations of the company from time to time be informed by notice in writing under the hand of the Chairman of any changes which may take place therein. The Bank shall be entitled to act upon any notice until the receipt of the further notice under the hand of the Chairman.
6. That this (these) Resolutions(s) be communicated to the bank and remain in force until notice in writing is given to the Bank by the Chairman.

We hereby certify that the above Resolutions have been duly entered in the Minutes Book and signed therein by the Chairman and are in accordance with the Articles of the Company and that the Company is a Private/ Public Company.

Secretary

Chairman

2018

Government of West Bengal Note Sheet

Urban Development & Municipal Affairs Department

Municipal Affairs (Planning & Budge) Branch

File No.MA/P/C-10/3S-21/2018

Subject : Proposal for Opening of a Separate Bank Account for Shelter for Urban Homeless under DAY- (NULM)

Notes and Orders

U.O. No. SUDA 145/18 dated 07.03.2018 (File No. 75/2014 (Pt) received from Director, SUDA (cp-22-1)

Pud placed below may kindly be seen

On the basis of Hon'ble Supreme Court of India regarding W.P. (C) No. 55 of 2003 read with W.P. (C) No. 572 of 2003 the Ministry of Housing & Urban Affairs (UPA Division), Govt. of India, vide Memo No. 12018(11)/1/2017 – UPA Section (EFS-3146332) dated 04.12.2017 has directed that with effect from the FY 2018-19, the States/UTs shall keep the funds earmarked/allocated for Shelter for Urban Homeless component, out of the funds under DAY-NULM, in a separate account, and furnish the detail of utilization of funds on Shelter for Urban Homeless component separately, along with the Final Utilization Certificate duly certified by the Auditor, as per the established procedure under GFR 2017 (cp-9-8).

Under the above stated circumstances the Director, SUDA has proposed for opening of a separate Bank A/c for Shelter for Urban homeless (SUH) under Dindayal Antoday Yojana – National Urban Livelihood Mission (DAY – NULM).

Now the file may be sent to Finance Department Group – T for necessary concurrence regarding opening of a separate Bank A/c for Shelter for Urban Homeless (SUH) under Dindayal Antoday Yojana – National Urban Livelihood Mission (DAY – NULM).

S.S.(S.G.)

f.A

Secretary
UD&MA
Department

suman
08.03.2018

'x' may be approved.

8/3/18

20803-118

Kubeni Shaw
1/3/18

Urban Development Deptt.
U/O No. 502
a. 2.18



**Workflow Based File Tracking System
Government of West Bengal
Finance - Group T**

File No : MA/P/C-10/3S-21/2018

Subject : Proposal for opening of a Separate bank account for SUH under DAY-NULM.

Department : Urban Development

We may agree to the proposal regarding opening of a Current Bank Account with a Nationalized Bank in favour of SUDA for keeping fund for shelter of Urban Homeless under DAY-NULM subject to observance of all rules and procedure as stipulated in FD Memo 675-F dt. 22/01/08.

Sd/-

Joint Secretary

14.03.2018

Sd/-

Additional Chief Secretary

16.03.2018

UO NO : Group T/2017-2018/1134

UO Date : 19/03/2018

Section Officer, Finance Department, Group - T

19/03/2018

TO
UD & MA Subtt.

19-03-18

SS (Sethi)

20.03.2018

Pls put up draft.

21/3/18

HA cum-10
21/3

Suman
22.3.18

From pre-page.

A Draft is placed below for approval.

S.S. (S/G)

Suman
22-03-18

22/3/18

Suman
Dir(SUDA)

22/3/18

1A

Government of West Bengal
Finance Department
Audit Branch

No. 675-F

Kolkata, the 22nd January, 2008.

MEMORANDUM

For some time past, it has been observed by the State Government in Finance Department that proposals are received from various Departments for opening of Bank Account in the name of Government Officials or Government Institutions/offices for implementing various development schemes/projects or for the management of particular Government Institutions. Sometimes funds are directly received from different Ministries of Government of India (GOI), and the amount is directly credited into the bank account of the concerned administrator, authorised to implement the project. In some cases, though the central fund is routed through State Budget, as per guideline of the concerned scheme/project, separate Bank Account is required to be opened. Again, in some cases fund from State Budget is released as 'Block Grants' to various State Government Institutions/Offices and the Institutions operate the fund through Bank Accounts in the name of those Institutions.

As a consequence of the various factors mentioned above, a large number of bank accounts dealing with public funds are under operation in the State. In order to monitor the actual utilisation of public fund transacted through bank accounts, it is necessary to streamline the opening and operation of bank accounts and develop an IT-based mechanism, which will provide the expenditure details and closing balance on a regular basis.

With this objective in view the Governor is pleased to issue the following guidelines in the matter of opening and operation of bank accounts by Government officials/agencies/institutions :

1. All Administrative Departments shall furnish the Finance Department (Group-T) with a comprehensive list of existing bank accounts opened with public money placed at the disposal of the Department or various authorities under the Department showing the (i) Name/Designation & Address of the account-holder, (ii) Name of the Bank & Branch, (iii) Account Number of the bank accounts and (iv) the Scheme/purpose for which the bank accounts were opened, in the prescribed format as per Annexure-I, by February 29, 2008.
2. The proposal of opening of new Bank (savings/current) Accounts shall be sent to Finance Department, Audit Branch, Group-'T', showing the information in respect of (i) the Name/Designation & Address of the account-holder, (ii) Name of the proposed Bank & Branch and (iii) the Scheme/purpose for which the bank accounts is to be opened, in the prescribed format as per Annexure-II.
3. No proposal for opening of new bank account shall be considered by the Finance Department unless the list as referred to in paragraph-1 is received by February 29, 2008.

contd...p/2.

- 10. The fund released by the Government shall not be withdrawn by any Department/District Officer for the purpose of keeping them in fixed deposit; it should be utilized as soon as possible, for the purpose for which it was sanctioned. This does not prohibit the Department to utilise subject to guidelines, if any, the amount of interest, if any credited by the bank in respect of any Savings Bank account.
- 11. Wherever feasible remittance facility may be used for transfer of fund from Head Office to the field offices and refund of unspent balances from field officers to Head Office. Under the Remittance facility system, the money can be transferred from one branch to other branch of the same bank under centralized computer system in real-time.
- 12. Reconciliation of these Bank Accounts shall be made on the quarterly basis.
- 13. Expenditure out of the bank accounts shall be subject to financial rules and guidelines, if any, under the relevant schemes. Concerned Administrative Department shall introduce post-audit to monitor the operation of bank accounts.
- 14. For the purpose of monitoring the bank accounts the Departments shall develop uniform, integrated and comprehensive Management Information and Accounting System and it shall, preferably, be on IT-base.
- 15. The Department shall nominate one nodal officer who shall be responsible for ~~the~~ coordinating the operation of all bank accounts under the control of the Department and sending quarterly reports as referred to in para 7.
- 16. The Directorate of Treasuries & Accounts, shall independently, arrange to collect information from the Bank regarding Bank-account-wise consolidated opening balance, receipt and payment during the period and closing balance for each account on quarterly basis for cross verification of the Departmental statements.

All Administrative Departments and the Scheme implementing authorities from State level to field level are requested to follow the above-mentioned guidelines where the funds flow directly from Government of India and/or State Government to Districts/Field Offices through Bank account for implementation of different development Scheme/Project.

Sd/- B. Bandyopadhyay
 Joint Secretary to the
 Government of West Bengal.
 Finance Department

ANNEXURE - I
(See Para I)

STATEMENT SHOWING THE PARTICULARS OF BANK ACCOUNTS ALREADY OPENED

Name of the Department : _____
Name of the Office : _____

Sl. No.	Name, Designation of the Account Holder and Address of the Office	Name of the Bank & Name of the Branch	Bank Account Number with nature of A/c. (Current/Savings)	Scheme and purpose of opening of the account	Date of opening	Bank Branch Code given by the DTA	Remarks
1	2	3	4	5	6	7	8

Date :

deepak/22012008

Signature with seal of the
Authorised Officer

ANNEXURE - II
 Proposal for Opening of Bank Account
 (See Para 2)

Name of the Department : _____

Name of the Office : _____

Sl. No.	Name, Designation of the Account Holder and Address of the Office	Name of the Bank & Name of the Branch	Bank A/c.No. with nature of account (Current/Savings)	Scheme and purpose of opening of the account	Date of opening	Bank Branch Code given by the DTA	Remarks
2		3	4	5	6	7	8

ate :

Signature with seal of
the Authorised Officer

deepak/22012008

FORM 103-III
(See Page 7)

QUARTERLY STATEMENT SHOWING THE AMOUNT DEPOSITED & WITHDRAWN FROM THE BANK ACCOUNTS

Name of the Department : _____
 Name of the Office : _____

Period : FROM _____ to _____

Sl. No. of Account holder	Designation of Account holder	Name of the Bank Branch/Account No.	Opening Balance	Amount Deposited	Amount Withdrawn	Closing Balance	Bank Branch Code given by the DTA
1	2	3	4	5	5	7	8

Date :

Signature with seal of the Authorised Officer

deepak/22012008

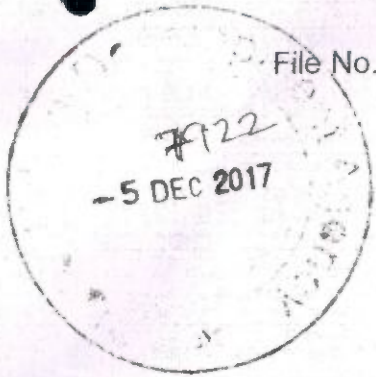
9

IMMEDIATE

File No. 12018(11)/1/2017/-UPA II Section (EFS- 3146332)

Government of India
Ministry of Housing & Urban Affairs
(UPA Division)

Nirman Bhawan, New Delhi
Dated 04.12.2017



Soumen De
Manager SMMU

Ram
05/12/2017

To

The Mission Director
State Urban Livelihoods Mission
All States/UTs

Additional Director
State Urban Development Agency
Municipal Affairs Deptt.
Govt of West Bengal

Subject: Writ Petition (C) No.55 of 2003 with W.P. (C) 572 of 2003 of Supreme Court of India in the matter of E.R. Kumar & ANR. Vs Union of India & ORS – reg.

Sir/ Madam,

As you are aware, a Committee was constituted as per the Order dated 11.11.2016 of Hon'ble Supreme Court to monitor the shelters established under SUH component of DAY-NULM. The Committee had submitted its interim report in April, 2017 and the final report on 10.7.2017. Two of the recommendations made by the committee in its reports are reproduced below:

Page No. 40 of Interim Report: "The states be directed to provide the details of the fund earmarked by them for construction of a shelter with the funds of NULM i.e. the quantum of funds received and utilization thereof by the States/ UTs".

Directions sought by Committee from Hon'ble Supreme Court: Directions be given to all States/ UTs to disclose the extent of amount spent by them on the component "Shelter for Urban Homeless", out of the amount released by the Centre for all the seven components of DAY-NULM. The year-wise details may be furnished by all the States/ UTs to the Ministry of Housing and Urban Poverty Alleviation".

2. In this connection, it would be recalled that the Member Secretary of the Committee had also written a letter to the States/ UTs directing for maintaining a separate account for SUH component.

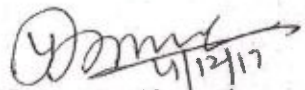
8

Now, the Hon'ble Supreme Court, after going through the Report, vide its Order dated 08.11.2017 in above mentioned case, has, *inter-alia*, observed that "the Union of India may also have to look into the matter on how to implement the Mission effectively so that crores of rupees that are sanctioned are not frittered away on issues that have no concern directly or indirectly with the NULM".

4. In pursuance of the recommendations of the Committee and above observations of the Hon'ble Supreme Court, it has been decided by the Ministry that with effect from the FY 2018-19, the States/ UTs shall keep the funds earmarked/allocated for Shelter for Urban Homeless component, out of the funds under DAY-NULM, in a separate account, and furnish the detail of utilization of funds on Shelter for Urban Homeless component, separately, along with the Final Utilization Certificate duly certified by the Auditor, as per the established procedure under GFR 2017.

5. All the States/UTs are, therefore, requested to take note of the above procedure for its strict adherence from the next FY 2018-19.

Yours faithfully,


4/12/17

(Surender Kumar)

Under Secretary to the Govt. of India

Ph. 23061185

A letter vide memo no. 12018(III)/1/2017 - UPA II Section dated 04.12.2017 has received by this office regarding the writ petition © no. 55 of 2003 with W.P. © 572 of 2003 of Supreme Court of India in the matter of E.R. Kumar & ANP. Vs Union of India & ORS. In the letter in Point No. 3 it is mentioned that the Hon'ble Supreme Court has passed an order on 08.11.2017 that 'The Union of India may also have look into the matter on how to implement the Mission effectively so that crores of rupees that are sanctioned are not frittered away on issues that have no concern directly or indirectly with the NULM'. Based on this, Ministry has been decided that with effect from the F.Y. 2018-19, the States / U.T. shall keep the funds earmarked / allocated for Shelter for Urban Homeless component, Out of the funds under DAY-NULM in a separate accountant and furnish the detail of utilization of funds on Shelter for Urban Homeless component Separately, along with the Final Utilization Certificate duly certified by the Auditor as per the established procedure under GFR 2017.

Under these circumstances now the above matter is submitted here with for your kind consideration.

F.A.
SUDA
Director SUDA
DD

SR
03/18

As per instruction, a separate bank a/c for SUH may be opened with the permission of the competent authority.

Proposal "X" may be approved *[Signature]* 3/1/18

[Signature]
03/1/18

TSC (SD)
2
Addl. Dir, NULM

On perusal of the letter as received from GOI two steps may be taken -

- i) Financial year wise details of amount spent on SUH component may be sent to GOI immediately
- ii) A separate A/c may be opened to maintain fund for construction of SUH from the year 2018-19.

[Signature]
4/1/18

02/18
04.1.18
No. 75/2014 (NULM)
Director SUDA
[Signature]

"X" prep page bottom may be considered for approval.

Secretary
UDMA Deptt

SAC
15/1/18

U. O. No. SUDA: 16/18

Dated: 15-01-18

Ref: 75/2014 (A1)

Dir SUDA

17.01.18

DD.

Sandip Kumar

As per the guideline of opening of new bank account of Finance department of WB. we have prepared the Annexure I, II & III and placed in the EP Book. If the Proposal for opening of new bank account is approved by the authority then we may open the Account for SUH component.

The Proposal is submitted for your kind perusal & Signature, if approved.

Dy. Director
SUDA

For

12/02/18
[Signature]

Receipt of acknowledgement

(D TO)

6

We may sent the file of opening of Bank A/Cs to Finance Group 'T' through our Administrative Department.

Deputy Director, SUDA

Bank 15.02.18

15/02/18

16/2/18

Director
GO.

Sandeep Bhattar
SMM - FINE
&
CCA, SUDA

Pl. prepare a draft letter to be Finance Dept. Group 'T' enclosing all the relevant document under the signature of the Director, SUDA mentioning the U.O. no. of the Secretary UD & MA Dept, Govt of WB or move a file to the Finance Department for the purpose.
Bank 19.02.18

SUH fund released by SUDA

Financial Year	SUH fund released
2014-15	75,00,000
2015-16	5,99,58,000
2016-17	9,43,03,000
2017-18	5,30,11,223
Total	21,47,72,223

STATE URBAN DEVELOPMENT AGENCY
Construction of Shelters for Urban Homeless - NULM
 Ledger Account

1-Apr-2014 to 11-Jan-2018

Date	Particulars	Vch Type	Vch No.	Debit	Credit
31-3-2015	To State Bank of India - WBSULM	Payment	SUDA/1679/14-15	75,00,000.00	
				75,00,000.00	
	By Closing Balance				75,00,000.00
				75,00,000.00	75,00,000.00
1-9-2015	To Opening Balance			75,00,000.00	
21-9-2015	To State Bank of India - WBSULM	Payment	SUDA/899/15-16	3,14,07,000.00	
17-11-2015	To State Bank of India - WBSULM	Payment	SUDA/1133/15-16	43,44,000.00	
8-2-2016	To State Bank of India - WBSULM	Payment	SUDA/1477/15-16	48,69,000.00	
15-2-2016	To State Bank of India - WBSULM	Payment	SUDA/1513/15-16	1,93,38,000.00	
				6,74,58,000.00	
	By Closing Balance				6,74,58,000.00
				6,74,58,000.00	6,74,58,000.00
1-7-2016	To Opening Balance			6,74,58,000.00	
15-7-2016	To State Bank of India - WBSULM	Payment	SUDA/421/16-17	3,42,72,000.00	
	To State Bank of India - WBSULM	Payment	SUDA/422/16-17	23,68,000.00	
8-8-2016	To State Bank of India - WBSULM	Payment	SUDA/529/16-17	46,03,000.00	
31-8-2016	To State Bank of India - WBSULM	Payment	SUDA/632/16-17	46,41,000.00	
12-9-2016	To State Bank of India - WBSULM	Payment	SUDA/703/16-17	46,44,000.00	
15-11-2016	To State Bank of India - SJSRY (Revised)	Payment	SUDA/981/16-17	1,13,02,000.00	
18-11-2016	To State Bank of India - SJSRY (Revised)	Payment	SUDA/1022/16-17	23,69,000.00	
4-1-2017	To State Bank of India - SJSRY (Revised)	Payment	SUDA/1211/16-17	48,21,000.00	
17-3-2017	To State Bank of India	Payment	SUDA/1518/16-17	2,28,94,000.00	
27-3-2017	To State Bank of India	Payment	SUDA/1551/16-17	23,89,000.00	
30-3-2017	By State Bank of India - WBSULM	Receipt	SUDA/199/16-17		96,52,950.00
	By State Bank of India - WBSULM	Receipt	SUDA/202/16-17		83,08,500.00
	By State Bank of India - WBSULM	Receipt	SUDA/203/16-17		1,24,62,750.00
				16,17,61,000.00	3,04,24,200.00
	By Closing Balance				13,13,36,800.00
				16,17,61,000.00	16,17,61,000.00
1-4-2017	To Opening Balance			13,13,36,800.00	
26-4-2017	To State Bank of India - WBSULM	Payment	SUDA/99/17-18	48,03,000.00	
	To State Bank of India - WBSULM	Payment	SUDA/101/17-18	46,05,000.00	
25-5-2017	To State Bank of India - WBSULM	Payment	SUDA/233/17-18	45,27,000.00	
29-6-2017	To State Bank of India - WBSULM	Payment	SUDA/368/17-18	2,87,63,000.00	
	To State Bank of India - WBSULM	Payment	SUDA/369/17-18	2,40,000.00	
14-7-2017	By SJSRY-STEP UP	Journal	SUDA/1/17-18		1,46,77,977.00
8-8-2017	To State Bank of India - WBSULM	Payment	SUDA/537/17-18	1,05,900.00	
17-8-2017	By State Bank of India - WBSULM	Receipt	SUDA/94/17-18		3,50,28,800.00
	By State Bank of India - WBSULM	Receipt	SUDA/95/17-18		2,33,52,400.00
30-8-2017	To State Bank of India - WBSULM	Payment	SUDA/617/17-18	1,05,000.00	
7-9-2017	To State Bank of India - WBSULM	Payment	SUDA/653/17-18	47,42,000.00	
12-10-2017	To State Bank of India - WBSULM	Payment	SUDA/805/17-18	1,10,500.00	
27-11-2017	To State Bank of India - WBSULM	Payment	SUDA/1075/17-18	23,30,000.00	
	To State Bank of India - WBSULM	Payment	SUDA/1080/17-18	1,40,700.00	
	To State Bank of India - WBSULM	Payment	SUDA/1081/17-18	1,47,123.00	
12-12-2017	To State Bank of India - WBSULM	Payment	SUDA/1157/17-18	23,92,000.00	
				18,43,48,023.00	7,30,59,177.00
	By Closing Balance				11,12,88,846.00
				18,43,48,023.00	18,43,48,023.00

2

STATE URBAN DEVELOPMENT AGENCY
National Urban Livelihood Mission (NULM)

Group Summary

1-Apr-2003 to 11-Dec-2017

Page 1

Particulars	Opening Balance	Transactions		Closing Balance
		Debit	Credit	
Capacity Building and Training (CB & T) Under NULM	36,26,63,055.50	34,27,03,374.55		1,99,59,680.95 Dr
Remuneration of C.O. Under CB & T-NULM	6,04,00,922.00	7,08,15,096.00		1,04,14,174.00 Cr
Remuneration of Support Staff Under CB & T-NULM	1,24,33,418.00	2,41,84,486.00		1,17,51,068.00 Cr
Remuneration of T.P.O. Under CB & T-NULM	1,62,85,467.00	6,35,00,909.00		4,72,15,442.00 Cr
Tech. Sup. at Nat, ST & CT Levels Under CB&T-NULM	3,67,29,947.50	7,37,50,694.00		3,70,20,746.50 Cr
Training & Other CBP for MMUs Under CB&T-NULM	23,68,13,301.00	11,04,52,189.55		12,63,61,111.45 Dr
Emp. by Skill Trg. & Placement (EST&P) Under NULM	61,24,67,999.00	38,54,79,482.08		22,69,88,516.92 Dr
Assessment & Certification of Training (EST&P-NULM)	3,48,38,000.00	1,82,54,520.00		1,65,83,480.00 Dr
Emp. by Skill Trg. & Placement Under EST&P-NULM	57,76,29,999.00	36,72,24,962.08		21,04,05,036.92 Dr
Self-Employment Programme (SEP) Under NULM	4,60,50,000.00	22,43,36,139.00		17,82,86,139.00 Cr
Credit Card for Enterprise Dev. Under SEP-NULM		4,36,95,014.00		4,36,95,014.00 Cr
Self-Emp. Ind. & Grp. Enterprises Under SEP-NULM	65,00,000.00	5,83,31,655.00		5,18,31,655.00 Cr
SHG-Bank Linkage Under SEP-NULM	3,95,50,000.00	7,86,14,455.00		3,90,64,455.00 Cr
Technology, Mktg. & Other Support Under SEP-NULM		4,36,95,015.00		4,36,95,015.00 Cr
Social Mobilisation & Inst. Dev. (SM&ID) Under NULM	49,98,05,991.00	73,70,85,273.00		23,72,79,282.00 Cr
Bldg. Comm. Inst.:SGHs & Fed. Under SM&ID-NULM	6,78,10,000.00	14,74,74,765.00		7,96,64,765.00 Cr
City Livelihood Centres (CLCs) Under SM&ID-NULM	4,27,10,077.00	14,95,03,046.00		10,67,92,969.00 Cr
Fund Support to RO Under SM&ID-NULM	2,35,35,000.00			2,35,35,000.00 Dr
Printing of Books of A/Cs for ALF, SHG & CLF-SM & ID	1,79,85,517.00	1,24,34,942.00		55,50,575.00 Dr
Rev. Fund Support to ALF Under SM&ID-NULM	15,50,000.00			15,50,000.00 Dr
Rev. Fund Support to SHGs & Fed. Under SM&ID-NULM	20,47,30,000.00	14,95,03,045.00		5,52,26,955.00 Dr
Rev. Fund Support to SHGs Under SM&ID-NULM	7,85,70,000.00			7,85,70,000.00 Dr
Trg. & Other CBP for SHGs & Fed. Under SM&ID-NULM	3,17,55,397.00	14,31,29,652.00		11,13,74,255.00 Cr
Universal Financial Inclusion Under SM&ID-NULM	3,11,60,000.00	13,50,39,823.00		10,38,79,823.00 Cr
A & OE Support to ULBs Under NULM	62,15,000.00			62,15,000.00 Dr
Construction of Shelters for Urban Homeless - NULM	21,23,80,223.00	10,34,83,377.00		10,88,96,846.00 Dr
Information, Education & Commn (IEC) Under NULM	5,05,22,318.00	5,17,37,823.00		12,15,505.00 Cr
Interest on NULM		3,47,55,088.50		3,47,55,088.50 Cr
Skill Dev. for Sustainable Inc. Under I & SP-NULM	4,16,250.00	4,16,250.00		
Support to Urban Street Vendors (SUSV) Under NULM	2,50,00,000.00			2,50,00,000.00 Dr
Grand Total	1,81,55,20,836.50	1,87,99,96,807.13		6,44,75,970.63 Cr

①

STATE URBAN DEVELOPMENT AGENCY
Construction of Shelters for Urban Homeless - NULM
 Ledger Account

1-Apr-2003 to 11-Dec-2017

Date	Particulars	Vch Type	Vch No.	Debit	Page 1 Credit
31-3-2015	To State Bank of India - WBSULM	Payment	SUDA/1679/14-15	75,00,000.00	
	By Closing Balance			75,00,000.00	75,00,000.00
				75,00,000.00	75,00,000.00
1-9-2015	To Opening Balance			75,00,000.00	
21-9-2015	To State Bank of India - WBSULM	Payment	SUDA/899/15-16	3,14,07,000.00	
17-11-2015	To State Bank of India - WBSULM	Payment	SUDA/1133/15-16	43,44,000.00	
8-2-2016	To State Bank of India - WBSULM	Payment	SUDA/1477/15-16	48,69,000.00	
15-2-2016	To State Bank of India - WBSULM	Payment	SUDA/1513/15-16	1,93,38,000.00	
	By Closing Balance			6,74,58,000.00	6,74,58,000.00
				6,74,58,000.00	6,74,58,000.00
1-7-2016	To Opening Balance			6,74,58,000.00	
15-7-2016	To State Bank of India - WBSULM	Payment	SUDA/421/16-17	3,42,72,000.00	
	To State Bank of India - WBSULM	Payment	SUDA/422/16-17	23,68,000.00	
8-8-2016	To State Bank of India - WBSULM	Payment	SUDA/529/16-17	46,03,000.00	
31-8-2016	To State Bank of India - WBSULM	Payment	SUDA/632/16-17	46,41,000.00	
12-9-2016	To State Bank of India - WBSULM	Payment	SUDA/703/16-17	46,44,000.00	
15-11-2016	To State Bank of India - SJSRY (Revised)	Payment	SUDA/981/16-17	1,13,02,000.00	
18-11-2016	To State Bank of India - SJSRY (Revised)	Payment	SUDA/1022/16-17	23,69,000.00	
4-1-2017	To State Bank of India - SJSRY (Revised)	Payment	SUDA/1211/16-17	48,21,000.00	
17-3-2017	To State Bank of India	Payment	SUDA/1518/16-17	2,28,94,000.00	
27-3-2017	To State Bank of India	Payment	SUDA/1551/16-17	23,89,000.00	
30-3-2017	By State Bank of India - WBSULM	Receipt	SUDA/199/16-17		96,52,950.00
	By State Bank of India - WBSULM	Receipt	SUDA/202/16-17		83,08,500.00
	By State Bank of India - WBSULM	Receipt	SUDA/203/16-17		1,24,62,750.00
	By Closing Balance			16,17,61,000.00	3,04,24,200.00
				16,17,61,000.00	13,13,36,800.00
					16,17,61,000.00
1-4-2017	To Opening Balance			13,13,36,800.00	
26-4-2017	To State Bank of India - WBSULM	Payment	SUDA/99/17-18	48,03,000.00	
	To State Bank of India - WBSULM	Payment	SUDA/101/17-18	46,05,000.00	
25-5-2017	To State Bank of India - WBSULM	Payment	SUDA/233/17-18	45,27,000.00	
29-6-2017	To State Bank of India - WBSULM	Payment	SUDA/368/17-18	2,87,63,000.00	
	To State Bank of India - WBSULM	Payment	SUDA/369/17-18	2,40,000.00	
14-7-2017	By SJSRY-STEP UP	Journal	SUDA/1/17-18		1,46,77,977.00
8-8-2017	To State Bank of India - WBSULM	Payment	SUDA/537/17-18	1,05,900.00	
17-8-2017	By State Bank of India - WBSULM	Receipt	SUDA/94/17-18		3,50,28,800.00
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30-8-2017	To State Bank of India - WBSULM	Payment	SUDA/617/17-18	1,05,000.00	
7-9-2017	To State Bank of India - WBSULM	Payment	SUDA/653/17-18	47,42,000.00	
12-10-2017	To State Bank of India - WBSULM	Payment	SUDA/805/17-18	1,10,500.00	
27-11-2017	To State Bank of India - WBSULM	Payment	SUDA/1075/17-18	23,30,000.00	
	To State Bank of India - WBSULM	Payment	SUDA/1080/17-18	1,40,700.00	
	To State Bank of India - WBSULM	Payment	SUDA/1081/17-18	1,47,123.00	
	By Closing Balance			18,19,56,023.00	7,30,59,177.00
				18,19,56,023.00	10,88,96,846.00
					18,19,56,023.00

Annexure-I
(See Para 1)
STATEMENT SHOWING THE PARTICULARS OF BANK ACCOUNTS ALREADY OPENED

Name of Department : Urban Development & Municipal Affairs Department
Name of the Office : State Urban Development Agency (SUDA)

Sl. No.	Name of the Bank & Name of the Branch	Bank Account Number with Nature of A/c (Current / Savings)	Scheme and purpose of opening of the account	Date of Opening	Bank Branch Code given by the DTA	Remarks
1	Punjab National Bank, Salt Lake, Sector-III Branch, GD-24, Salt Lake City, Kolkata-700 106.	1625002100003574	Administrative & Operational Expenses of SUDA	Too old	N.A.	
2		10836424685	Other various small schemes executed by SUDA	Too old	N.A.	
3		31227506984	Backward Region Grant Fund	25.06.2010	N.A.	
4		31227510436	Community Based Primary Health Care Services	25.06.2010	N.A.	
5		30255770088	DFID funded Honorary Health Worker Scheme	25.06.2010	N.A.	
6		31227514849	Indira Gandhi National Disability Pension	25.06.2010	N.A.	
7		31227514848	Indira Gandhi National Old Age Pension	25.06.2010	N.A.	
8		31227522747	Indira Gandhi National Widow Pension	25.06.2010	N.A.	
9		31227524891	Integrated Low Cost Sanitation	25.06.2010	N.A.	
10	State Bank of India, Salt Lake, Sector-I Branch, DB-2, Sector-I,	31227456477	Janani Suraksha Yojana	25.06.2010	N.A.	
11		31227532802	National Family Benefit Scheme	25.06.2010	N.A.	
12		31227540799	Nehru Rozgar Yojana	25.06.2010	N.A.	
13	Salt Lake City, Kolkata-700 064.	31227536352	National Slum Development Programme	25.06.2010	N.A.	
14		31227538779	National Urban Information System	25.06.2010	N.A.	
15		31494351965	Swarna Jayanti Sahari Rozgar Yojana (CML-KUSP)	25.06.2010	N.A.	
16		31227544342	Swarna Jayanti Sahari Rozgar Yojana	25.06.2010	N.A.	
17		30156381541	Urban Infrastructure Scheme for Small & Medium Towns	30.03.2007	N.A.	
18		31227548041	Urban Statistics for HR Assessment	25.06.2010	N.A.	
19		10836424823	Valmiki Aaribedkar Awas Yojana	Too old	N.A.	
20		34061121921	National Urban Livelihood Mission	21.08.2014	N.A.	
21	United Bank of India, Salt Lake, Sector-V Branch, Y-12 & 24, Block-EP, Sector-V	1432010081847	14th Finance Commission	29.07.2010	N.A.	
22	Salt Lake, Kolkata-700 091.	143205006118	Integrated Housing & Slum Development Programme	01.10.2007	N.A.	
23	HDFC Bank Limited, Salt Lake, Sector-III Branch, IB-154, Sector-III,	50200007245624	Comprehensive Capacity Building Programme under JNNURM	27.08.2014	N.A.	
24	Salt Lake, Kolkata-700 106.	50200011146861	National Urban Health Mission (NUHM)	19.03.2015	N.A.	
25	Axis Bank Ltd., Salt Lake, Sector-II Branch, BJ-110, Sector-II,	916010072244925	Swachh Bharat Mission (SBM)	25.01.2016	N.A.	
	Salt Lake City, Kolkata - 700 091.					
26	Central Bank of India, Salt Lake Branch, DD/13-18, Sector-I,	3207615590	Urban Primary Health Care Services (UPHCS)	21.08.2014	N.A.	
	Salt Lake, Kolkata-700 064.					
27	ICICI Bank Ltd.,	4201031286	Pradhan Mantri Awas Yojana	27.08.2014	N.A.	
28	Salt Lake, Sector-II Branch,	4201031288	Indira Gandhi National Disability Pension	15.09.2017	N.A.	
29	Debeshish, BJ-140, Sector-II	4201031287	Indira Gandhi National Old Age Pension	15.09.2018	N.A.	
30	Salt Lake City,	4201031289	Indira Gandhi National Widow Pension	15.09.2019	N.A.	
31	Kolkata - 700 091.	4201031290	National Family Benefit Scheme	15.09.2020	N.A.	

Date : 12.02.2018


 Signature with Seal of the Authorised Officer
Director
 State Urban Development Agency

Annexure-II
(See Para 2)

PROPOSAL FOR OPENING OF BANK ACCOUNT

Name of Department : Urban Development & Municipal Affairs Department
Name of the Office : State Urban Development Agency (SUDA)

Sl. No.	Name, Designation of the Account Holder and Address of the Office	Name of the Bank & Name of the Branch	Bank Account Number with Nature of A/c (Current / Savings)	Scheme and purpose of opening of the account	Date of Opening	Bank Branch Code given by the DTA	Remarks
1	Mr. Sutannu Prasad Kar, I.A.S., Director, SUDA and Mr. Petrus Anuranjan Soreng, W.B.A & A.S., Finance Officer, SUDA and Md. Asif Sardar W.B.A & A.S., Finance Officer, SUDA State Urban Development Agency, "ILGUS BHAWAN", HC Block, Sector-III, Bidhannagar, Kolkata-700106	Yet to be decided	Current Account yet to be opened	Dedicated Bank Account for mobilisation of scheme fund in respect of Shelter for Urban Homeless (SUH) component under National Urban Livelihood Mission (NULM)	Yet to Open	N.A.	

Date : 12.02.2018

Signature with seal of the Authorised Officer

Director

State Urban Development Agency

QUARTERLY STATEMENT SHOWING THE AMOUNT DEPOSITED & WITHDRAWN FROM THE BANK ACCOUNTS

Annexure-III
(See Para 7)

Name of Department : Urban Development & Municipal Affairs Department
 Name of the Office : State Urban Development Agency (SUDA)
 Period : From 01.10.2017 to 31.12.2017

Sl. No.	Designation of Account Holder	Name of the Bank / Branch	Account No.	Opening Balance	Amount Deposited	Amount Withdrawn	Closing Balance	Bank Branch Code given by the DTA
1	2		3	4	5	6	7	8
1		Punjab National Bank, Salt Lake, Sector-III Branch, GD-24, Salt Lake City, Kolkata-700 106.	16250021000003574	7,59,54,473.00	12,48,934.00	6,40,37,727.00	1,31,65,680.00	N.A.
2			10836424685	15,34,80,986.00	43,06,64,029.00	37,79,79,184.00	20,61,65,831.00	N.A.
3			31227506984	31,70,453.00	0.00	0.00	31,70,453.00	N.A.
4			31227510436	25,67,03,955.00	1,73,55,077.00	17,34,54,346.00	10,06,04,686.00	N.A.
5			30255770088	18,11,585.00	0.00	0.00	18,11,585.00	N.A.
6			31227514849	48,842.00	3,15,000.00	2,39,295.00	1,24,547.00	N.A.
7			31227519348	68,10,684.00	6,06,831.00	0.00	74,17,515.00	N.A.
8			31227522747	8,000.00	0.00	0.00	8,000.00	N.A.
9			31227524891	9,92,353.83	1,70,147.00	0.00	11,62,500.83	N.A.
10			31227456477	1,04,47,911.00	0.00	0.00	1,04,47,911.00	N.A.
11	Mr. Satanu Prasad Kar, I.A.S., Director, SUDA	State Bank of India, Salt Lake, Sector-I Branch, DB-2, Sector-I, Salt Lake City, Kolkata-700 064.	31227533802	15,41,311.00	0.00	0.00	15,41,311.00	N.A.
12			31227540799	11,46,311.00	5,95,163.00	0.00	17,41,474.00	N.A.
13			31227536352	4,31,079.00	66,491.00	0.00	4,97,570.00	N.A.
14			31227538779	25,12,447.00	0.00	0.00	25,12,447.00	N.A.
15			31494351965	19,710.00	0.00	0.00	19,710.00	N.A.
16	Mr. Petrus Anuranjan Soreng,		31227544342	12,23,205.00	0.00	0.00	12,23,205.00	N.A.
17	W.B.A & A.S.,		30156381541	52,51,81,056.00	46,85,46,600.00	15,00,39,766.00	84,36,87,890.00	N.A.
18	Finance Officer, SUDA		31227548041	75,485.00	0.00	0.00	75,485.00	N.A.
19			10836424823	29,08,424.00	0.00	0.00	29,08,424.00	N.A.
20			34061121921	10,30,67,596.00	18,21,505.00	3,51,60,461.00	6,97,30,640.00	N.A.
21	Mr. Md. Asif Sarder	United Bank of India, Salt Lake, Sector-V Branch, Y-12 & 24, Block-EP, Sector-V Salt Lake, Kolkata-700 091.	1432010081847	21,39,378.00	5,20,97,88,229.00	5,20,97,50,000.00	21,77,607.00	N.A.
22	W.B.A & A.S., Finance Officer, SUDA		1432050006118	25,88,58,388.00	30,28,694.00	19,38,719.00	25,99,48,963.00	N.A.
23			50200007245624	2,36,254.00	6,00,12,055.00	6,00,00,000.00	2,48,309.00	N.A.
24	State Urban Development Agency, "ILGUS BHAWAN", HC Block, Sector-III, Bidhannagar, Kolkata-700106	HDFC Bank Limited, Salt Lake, Sector-III Branch, IB-154, Sector-III, Salt Lake, Kolkata-700 106.	502000011146861	18,39,58,800.00	17,29,13,649.00	22,21,28,592.00	13,47,43,857.00	N.A.
25		Axis Bank Ltd, Salt Lake, Sector-II Branch, BI-110, Sector-II, Salt Lake City, Kolkata - 700 091.	916010072244925	2,68,28,46,762.00	20,53,14,663.00	22,32,57,766.00	2,66,49,03,659.00	N.A.
26		Central Bank of India, Salt Lake Branch, DD/13-18, Sector-I, Salt Lake, Kolkata-700 064.	3207615590	37,38,44,094.00	59,48,13,440.00	67,71,71,025.00	29,14,86,509.00	N.A.
27		ICICI Bank Ltd., Salt Lake, Sector-II Branch, Debaghish, BI-140, Sector-II Salt Lake City, Kolkata - 700 091.	4201031286	3,61,60,22,619.00	6,70,03,780.00	41,93,27,576.00	3,26,36,98,823.00	N.A.
28			4201031288	2,75,25,907.00	26,483.00	1,98,15,600.00	77,36,790.00	N.A.
29			4201031287	62,63,10,800.00	4,19,896.00	34,41,94,756.00	28,25,35,940.00	N.A.
30			4201031289	25,75,78,800.00	3,02,17,851.00	28,10,61,600.00	67,35,051.00	N.A.
31			4201031290	11,11,63,552.00	83,422.00	3,80,00,000.00	7,32,48,974.00	N.A.

[Signature]

Signature with seal of the Authorized Officer

Director

State Urban Development Agency

Date : 12.02.2018

Annexure-I
(See Para 1)
STATEMENT SHOWING THE PARTICULARS OF BANK ACCOUNTS ALREADY OPENED

Name of Department : Urban Development & Municipal Affairs Department
Name of the Office : State Urban Development Agency (SUDA)

Sl. No.	Name of the Bank & Name of the Branch	Bank Account Number with Nature of A/c (Current / Savings)	Scheme and purpose of opening of the account	Date of Opening	Bank Branch Code given by the DTA	Remarks
1	Punjab National Bank, Salt Lake, Sector-III Branch, GD-24, Salt Lake City, Kolkata-700 106.	16250021000003574	Administrative & Operational Expenses of SUDA	Too old	N.A.	
2		10836424685	Other various small schemes executed by SUDA	Too old	N.A.	
3		31227506984	Backward Region Grant Fund	25.06.2010	N.A.	
4		31227510436	Community Based Primary Health Care Services	25.06.2010	N.A.	
5		30255770088	DFID funded Honorary Health Worker Scheme	25.06.2010	N.A.	
6		31227514849	Indira Gandhi National Disability Pension	25.06.2010	N.A.	
7		31227514848	Indira Gandhi National Old Age Pension	25.06.2010	N.A.	
8		31227522747	Indira Gandhi National Widow Pension	25.06.2010	N.A.	
9	State Bank of India,	31227524891	Integrated Low Cost Sanitation	25.06.2010	N.A.	
10	Salt Lake, Sector-I Branch,	31227456477	Janani Suraksha Yojana	25.06.2010	N.A.	
11	DB-2, Sector-I,	31227532802	National Family Benefit Scheme	25.06.2010	N.A.	
12	Salt Lake City, Kolkata-700 064.	31227540799	Nehru Rozgar Yojana	25.06.2010	N.A.	
13		31227536352	National Slum Development Programme	25.06.2010	N.A.	
14		31227538779	National Urban Information System	25.06.2010	N.A.	
15		31494351965	Swarna Jayanti Sahari Rozgar Yojana (CMTU-KUSP)	25.06.2010	N.A.	
16		31227544342	Swarna Jayanti Sahari Rozgar Yojana	25.06.2010	N.A.	
17		30156381541	Urban Infrastructure Scheme for Small & Medium Towns	30.03.2007	N.A.	
18		31227548041	Urban Statistics for HR Assessment	25.06.2010	N.A.	
19		10836424823	Vainiki Ambedkar Awas Yojana	Too old	N.A.	
20		34061121921	National Urban Livelihood Mission	21.08.2014	N.A.	
21	United Bank of India, Salt Lake, Sector-V Branch, Y-12 & 24, Block-EP, Sector-V	1432010081847	14th Finance Commission	29.07.2010	N.A.	
22	Salt Lake, Kolkata-700 091.	1432050006118	Integrated Housing & Slum Development Programme	01.10.2007	N.A.	
23	HDFC Bank Limited, Salt Lake, Sector-III Branch, IB-154, Sector-III,	50200007245624	Comprehensive Capacity Building Programme under JNNURM	27.08.2014	N.A.	
24	Salt Lake, Kolkata-700 106.	50200011146861	National Urban Health Mission (NUHM)	19.03.2015	N.A.	
25	Axis Bank Ltd., Salt Lake, Sector-II Branch, BJ-110, Sector-II,	916010072244925	Swachh Bharat Mission (SBM)	25.01.2016	N.A.	
26	Salt Lake City, Kolkata - 700 091.					
	Central Bank of India, Salt Lake Branch, DD/13-18, Sector-I,	3207615590	Urban Primary Health Care Services (UPHCS)	21.08.2014	N.A.	
27	Salt Lake, Kolkata-700 064.					
27	ICICI Bank Ltd.,	4201031286	Pradhan Mantri Awas Yojana	27.08.2014	N.A.	
28	Salt Lake, Sector-II Branch,	4201031288	Indira Gandhi National Disability Pension	15.09.2017	N.A.	
29	Debushish, BJ-140, Sector-II	4201031287	Indira Gandhi National Old Age Pension	15.09.2018	N.A.	
30	Salt Lake City,	4201031289	Indira Gandhi National Widow Pension	15.09.2019	N.A.	
31	Kolkata - 700 091.	4201031290	National Family Benefit Scheme	15.09.2020	N.A.	

Date : 12.02.2018

Signature with seal of the Authorised Officer

Director

State Urban Development Agency

Annexure-II
(See Para 2)

PROPOSAL FOR OPENING OF BANK ACCOUNT

Name of Department : Urban Development & Municipal Affairs Department
Name of the Office : State Urban Development Agency (SUDA)

Sl. No.	Name, Designation of the Account Holder and Address of the Office	Name of the Bank & Name of the Branch	Bank Account Number with Nature of A/c (Current / Savings)	Scheme and purpose of opening of the account	Date of Opening	Bank Branch Code given by the DTA	Remarks
1	Mr. Sutanu Prasad Kar, I.A.S., Director, SUDA and Mr. Petrus Anuranjan Soreng, W.B.A & A.S., Finance Officer, SUDA						
1	Md. Asif Sardar W.B.A & A.S., Finance Officer, SUDA State Urban Development Agency, "ILGUS BHAWAN", HC Block, Sector-III, Bidhannagar, Kolkata-700106	Yet to be decided	Current Account yet to be opened	Dedicated Bank Account for mobilisation of scheme fund in respect of Shelter for Urban Homeless (SUH) component under National Urban Livelihood Mission (NULM)	Yet to Open	N.A.	

Date : 12.02.2018

[Signature]
Signature with seal of the Authorised Officer

Director

State Urban Development Agency

Annexure-III
(See Para 7)

QUARTERLY STATEMENT SHOWING THE AMOUNT DEPOSITED & WITHDRAWN FROM THE BANK ACCOUNTS

S/L No.	Designation of Account Holder	Name of the Bank / Branch	Account No.	Opening Balance	Amount Deposited	Amount Withdrawn	Closing Balance	Bank Branch Code given by the DTA
1	2		3	4	5	6	7	8
1		Punjab National Bank, Salt Lake, Sector-III Branch, GD-24, Salt Lake City, Kolkata-700 106	1625002100003574	7,59,54,473.00	12,48,934.00	6,40,37,727.00	1,31,65,680.00	N.A.
2			10836424685	15,34,80,986.00	43,06,64,029.00	37,79,79,184.00	20,61,65,831.00	N.A.
3			31227506984	31,70,453.00	0.00	0.00	31,70,453.00	N.A.
4			31227510436	25,67,03,955.00	1,73,55,077.00	17,34,54,346.00	10,06,04,686.00	N.A.
5			3025770088	18,11,585.00	0.00	0.00	18,11,585.00	N.A.
6			31227514849	48,842.00	3,15,000.00	2,39,295.00	1,24,547.00	N.A.
7			31227519348	68,10,684.00	6,06,831.00	0.00	74,17,515.00	N.A.
8			31227522747	8,000.00	0.00	0.00	8,000.00	N.A.
9			31227524891	9,92,353.83	1,70,147.00	0.00	11,62,500.83	N.A.
10	Mr. Satanu Prasad Kar, I.A.S., Director, SUDA	State Bank of India, Salt Lake, Sector-I Branch, DB-2, Sector-I, Salt Lake City, Kolkata-700 064.	31227456477	1,04,47,911.00	0.00	0.00	1,04,47,911.00	N.A.
11			31227532802	15,41,311.00	0.00	0.00	15,41,311.00	N.A.
12			31227540799	11,46,311.00	5,95,163.00	0.00	17,41,474.00	N.A.
13			31227536352	4,31,079.00	66,491.00	0.00	4,97,570.00	N.A.
14			31227538779	25,12,447.00	0.00	0.00	25,12,447.00	N.A.
15	Mr. Petrus Anuranjan Soreng, W.B.A & A.S., Finance Officer, SUDA		3149431965	19,710.00	0.00	0.00	19,710.00	N.A.
16			31227544342	12,23,205.00	0.00	0.00	12,23,205.00	N.A.
17			30156581541	52,51,81,056.00	46,85,46,600.00	15,00,39,766.00	84,36,87,890.00	N.A.
18			31227548041	75,485.00	0.00	0.00	75,485.00	N.A.
19			10836424823	29,08,424.00	0.00	0.00	29,08,424.00	N.A.
20			34061121921	10,30,67,596.00	18,23,505.00	3,51,60,461.00	6,97,30,640.00	N.A.
21	Md. Asif Sardar W.B.A & A.S., Finance Officer, SUDA	United Bank of India, Salt Lake, Sector-V Branch, Y-12 & 24, Block-EP, Sector-V Salt Lake, Kolkata-700 091.	1432010081847	21,39,378.00	5,20,97,88,229.00	5,20,97,50,000.00	21,77,607.00	N.A.
22			1432050006118	25,88,58,388.00	30,28,694.00	19,38,719.00	25,99,48,365.00	N.A.
23	State Urban Development Agency, "ILGUS BHAWAN", HC Block, Sector-III, Bidhanagar, Kolkata-700106	HDFC Bank Limited, Salt Lake, Sector-III Branch, IB-154, Sector-III, Salt Lake, Kolkata-700 106.	5020000724524	2,36,254.00	6,00,12,055.00	6,00,00,000.00	2,48,309.00	N.A.
24			50200011146861	18,39,58,800.00	17,29,13,649.00	22,21,28,592.00	13,47,43,857.00	N.A.
25		Axis Bank Ltd, Salt Lake, Sector-II Branch, BJ-110, Sector-II, Salt Lake City, Kolkata - 700 091.	916010072244925	2,68,28,46,762.00	20,53,14,663.00	22,32,57,766.00	2,66,49,03,659.00	N.A.
26		Central Bank of India, Salt Lake Branch, DD/13-18, Sector-I, Salt Lake, Kolkata-700 064.	3207615590	37,38,44,094.00	59,48,13,440.00	67,71,71,025.00	29,14,86,509.00	N.A.
27		ICICI Bank Ltd, Salt Lake, Sector-II Branch, Debashish, BI-140, Sector-II Salt Lake City, Kolkata - 700 091.	4201031286	3,61,60,22,619.00	6,70,03,780.00	41,93,27,576.00	3,26,36,98,823.00	N.A.
28			4201031288	2,75,25,907.90	26,483.00	1,98,15,600.00	77,36,790.00	N.A.
29			4201031287	62,63,10,800.00	4,19,896.00	34,41,94,756.00	28,25,35,940.00	N.A.
30			4201031289	25,75,78,800.00	3,02,17,851.00	28,10,61,600.00	67,35,051.00	N.A.
31			4201031290	11,11,63,552.00	85,422.00	3,80,00,000.00	7,32,48,974.00	N.A.

Date : 12.02.2018

Signature with seal of  Officer
State Urban Development Agency