



STATE BANK OF INDIA
460 PARK AVENUE,
NEW YORK, NY 10022

(For office use) Account
No. _____
DEP-MC

APPLICATION FOR MMD/ CHECKING ACCOUNT (New customers should fill this form along with Form DEP-1)		
APPLICATION FOR	<input type="checkbox"/> Money Market Deposit Account <input type="checkbox"/> Checking Account	
CUSTOMER NUMBER <i>(New customers may leave this blank)</i>		
I / We request you to open the account(s) as mentioned above with your branch. I /We have read and understood the terms and conditions governing the account(s). I/We acknowledge the receipt of the interest rate chart applicable for Money Market Deposits Account.		
PURPOSE OF THE ACCOUNT <i>(Check all that are applicable)</i>	<input type="checkbox"/> Savings <input type="checkbox"/> Sending remittances to India <input type="checkbox"/> Receiving Social Security benefits <input type="checkbox"/> Receiving salary <input type="checkbox"/> Others (specify):	
USUAL ACTIVITY IN THE ACCOUNT <i>(Check all that are applicable)</i>	<input type="checkbox"/> Collection of checks <input type="checkbox"/> Issue of checks <input type="checkbox"/> Cash receipts / payments <input type="checkbox"/> Receipt of wire transfers <input type="checkbox"/> Issue of wire transfers <input type="checkbox"/> Others (specify)	
Please note: we may ask for additional documents on a case to case basis	No of International Wire Transfers per Month _____	Volume of Cash transactions per annum _____ Single Largest Transaction amount(International Transaction) _____
EXPECTED ANNUAL VOLUME OF TRANSACTIONS	<input type="checkbox"/> < \$10,000 <input type="checkbox"/> \$10,000 – 25,000 <input type="checkbox"/> \$25,000 – 50,000 <input type="checkbox"/> \$50,000 – 100,000 <input type="checkbox"/> \$100,000 – 150,000 <input type="checkbox"/> > \$150,000	
SOURCE OF FUNDS <i>(Check All That Are Applicable)</i>	<input type="checkbox"/> Current Income/wages <input type="checkbox"/> Past savings <input type="checkbox"/> Pension/S.S. Benefits <input type="checkbox"/> Rent <input type="checkbox"/> Liquidation of investments <input type="checkbox"/> Sale of property <input type="checkbox"/> Others (specify):	
MODE OF FIRST DEPOSIT	<input type="checkbox"/> Debit my/our existing Checking / MMD account with you, OR <input type="checkbox"/> Check No. _____ attached <input type="checkbox"/> Amount _____ <input type="checkbox"/> Bank Name _____	
MODE OF OPERATION	<input type="checkbox"/> Self <input type="checkbox"/> Joint with right of survivorship.	
DO YOU WANT CHECK BOOK ON THIS ACCOUNT? <i>(Check books are charged. No temporary checks are issued.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
1st APPLICANT	2nd APPLICANT	3rd APPLICANT
Signature:	Signature:	Signature:
Name:	Name:	Name:
Date:	Place:	