



Application Date

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Y Y Y Y

Tatkal

Non Tatkal (For bank Use)

099

Please open my / our ☐ [Tick anyone] Savings ☐ Savings Max ☐ Savings Salary ☐ Salary & Reimbursement ☐ Current ☐ Kids Advantage Account ☐ BSBDA ☐ KGC SB & CA ☐
[Tick anyone] FD ☐ RD ☐ PPF A/C ☐ Sukanya Samriddhi A/C In your Branch Code Branch Name

(A) PERSONAL DETAILS: APPLICANT NAME (Leave a space between two words.)

PREFIX	FIRST NAME	MIDDLE NAME	SURNAME
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

In case the applicant is a minor, please write parent/guardian's name (as an applicant) below the Minor's Name

*** NATIONALITY**

***PAN NO (If not available attach Form 60)**

Form 60

I/We provide my/our consent to link Aadhaar with HDFC Bank (T&C)
AADHAAR CARD NO

Link with A/C for DBT

Link with A/C for DBT

1st Applicant	2nd Applicant	Previous Bank name where subsidy is received	1st Applicant	2nd Applicant
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

***DATE OF BIRTH**

AGE PROOF

*** Male / Female**

Third Gender

***MOTHER'S MAIDEN NAME**

1st Applicant	2nd Applicant	AGE PROOF	* Male / Female	Third Gender	*MOTHER'S MAIDEN NAME
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(B) OPERATING INSTRUCTION

Single

Either or Survivor

Jointly (Debit/ATM Card not issued)

Former or survivor

Minor under Guardian

(C) CUSTOMER ID (Mandatory for Existing Customers)

1st Applicant	2nd Applicant
<input type="text"/>	<input type="text"/>
<input type="checkbox"/> I confirm that I do not have any existing customer ID / customer ID apart from the one mentioned. In case found otherwise, Bank reserves the right to consolidate the customer ID's as it may decide, without any prior notice to me.	<input type="checkbox"/> I confirm that I do not have any existing customer ID / customer ID apart from the one mentioned. In case found otherwise, Bank reserves the right to consolidate the customer ID's as it may decide, without any prior notice to me.

(D) MAILING ADDRESS - 1st APPLICANT

(For existing customers, address given below will be updated for the primary applicant in all accounts held with the bank)

*Company Name / Flat No & Bldg Name	*Road No./Name	*Landmark	*City	*State	*PIN Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Proof Attached

"Please mention a prominent landmark to ensure that the deliverables reach you"

PERMANENT ADDRESS 1st APPLICANT (Mandatory if mailing address is office address)

Please tick in case permanent address is the same as mailing address

Proof Attached

Flat No & Bldg Name	*Road No./Name	*Landmark	*City	*State	*PIN Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

MAILING ADDRESS - 2nd APPLICANT

Please tick if same as first holder mailing address

Proof Attached

*Company name / *Flat No & Bldg Name	*Road No./Name	*Landmark	*City	*State	*PIN Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

"Please mention a prominent landmark to ensure that the deliverables reach you"

PERMANENT ADDRESS 2nd APPLICANT (Mandatory if mailing address is office address)

Please tick in case permanent address is the same as mailing address

Proof Attached

*Flat No & Bldg Name	*Road No./Name	*Landmark	*City	*State	*PIN Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(E) CONTACT DETAILS : Existing customer can update their contact details. For New customer contact details are Mandatory.

1st Appl.	* Tel (R)	S T D	-	N U M B E R	* Tel (O)	S T D	-	N U M B E R	Ext.
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

2nd Appl.	* Email ID	* Mobile	91	Service Provider	Insta Alert	Please (✓) If Email ID is Not Available
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

IMPORTANT: Please furnish your correct email ID. You will receive free monthly account statements at this email ID for all accounts linked to the customer ID of the 1st applicant. You will be registered for SMS Alerts-Credit/Debit transaction greater than Rs. 5000/- and Salary Credit Alert (Salary Account Only). You can register for Bill Pay facility for the following service providers: Vodafone, Airtel, BSNL - Cell One, Docomo, Idea.

I authorize HDFC Bank to set Standing Instruction on my Debit Card to make payment of utility bills on my behalf for bill pay request as given in this form. Terms and Condition apply.

Occupation	Salaried	Self-employed	Retired	Self-employed prof.	Housewife	Politician	Student	Others _____
If salaried employed with	Private ltd	Partnership	Proprietorship	Public limited	Public sector	Government	Multinational	Others _____

Self Employed since	<input type="text"/>	<input type="text"/>	Years	<input type="text"/>	<input type="text"/>	Months																					
Nature of Business	<input type="checkbox"/>	<input type="checkbox"/> Manufacturing		<input type="checkbox"/>	<input type="checkbox"/> Service Provider		<input type="checkbox"/>	<input type="checkbox"/> Agriculture		<input type="checkbox"/>	<input type="checkbox"/> Bullion/Gold/Jewellery		<input type="checkbox"/>	<input type="checkbox"/> Stock Broker		<input type="checkbox"/>	<input type="checkbox"/> Real Estate		<input type="checkbox"/>	<input type="checkbox"/> Trader		<input type="checkbox"/>	<input type="checkbox"/> Money Lender		<input type="checkbox"/>	<input type="text"/> Others _____	
Date of incorporation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																			
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	<input type="text"/>																										

Source of funds	Salary	Business Income	Agriculture	Investment Income	Others						
Gross Annual income	< 50,000	50 K-1 lac	1 - 3 lac	3 - 5 lac	5 - 7.5 lac	7.5 - 10 lac	10 - 15 lac	15 - 25 lac	25 - 50 lac	50 lac - 1 CR	> 1 CR
Residence type	Owned	Rented/Leased	Ancestral/Family	Company provided							

Occupation	<input type="checkbox"/> Salaried	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Self-employed prof.	<input type="checkbox"/> Housewife	<input type="checkbox"/> Politician	<input type="checkbox"/> Student	<input type="checkbox"/> Others _____
If salaried employed with	<input type="checkbox"/> Private ltd	<input type="checkbox"/> Partnership	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Public limited	<input type="checkbox"/> Public sector	<input type="checkbox"/> Government	<input type="checkbox"/> Multinational	<input type="checkbox"/> Others _____

Self Employed since	<input type="text"/>	<input type="text"/>	Years	<input type="text"/>	<input type="text"/>	Months																																							
Nature of Business	<input type="checkbox"/>	<input type="checkbox"/>		Manufacturing		<input type="checkbox"/>	<input type="checkbox"/>		Service Provider		<input type="checkbox"/>	<input type="checkbox"/>		Agriculture		<input type="checkbox"/>	<input type="checkbox"/>		Bullion/Gold/Jewellery		<input type="checkbox"/>	<input type="checkbox"/>		Stock Broker		<input type="checkbox"/>	<input type="checkbox"/>		Real Estate		<input type="checkbox"/>	<input type="checkbox"/>		Trader		<input type="checkbox"/>	<input type="checkbox"/>		Money Lender		<input type="checkbox"/>	<input type="checkbox"/>		Others _____	
Date of incorporation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Annual Turnover (in Lacs) <input type="text"/>										<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(Applicable for Current Account)																			
Type of Company/Firm	<input type="checkbox"/>	<input type="checkbox"/>		Sole Proprietorship		<input type="checkbox"/>	<input type="checkbox"/>		Partnership		<input type="checkbox"/>	<input type="checkbox"/>		Public Limited Co.		<input type="checkbox"/>	<input type="checkbox"/>		Private Ltd Co		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		Others _____																			
Self Employed Professional	<input type="checkbox"/>	<input type="checkbox"/>		Doctor		<input type="checkbox"/>	<input type="checkbox"/>		CA/CS		<input type="checkbox"/>	<input type="checkbox"/>		Lawyer		<input type="checkbox"/>	<input type="checkbox"/>		Architect		<input type="checkbox"/>	<input type="checkbox"/>		IT Consultant		<input type="checkbox"/>	<input type="checkbox"/>		Others _____																

Source of funds	Salary	Business Income	Agriculture	Investment Income	Others
Gross Annual income	< 50,000	50 K-1 lac 1 - 3 lac	3 - 5 lac 5 - 7.5 lac	7.5 - 10 lac 10 - 15 lac	15 - 25 lac 25 - 50 lac 50 lac - 1 CR > 1 CR
Residence type	Owned	Rented/Leased	Ancestral/Family	Company provided	

[illegible]

Name, Designation, Sign &
Company Seal for Salary A/C
Introduction

A/C > 6 months	Sign verified
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PB Signature _____

PB Code					
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Signature of introducer

Cheque **HDFC Bank A/C Transfer** **Cash** (To open account with cash, customer must deposit the cash in person in **a/c opening branch only**)

[illegible]

Amount (Rs) for SB account						Amount (Rs) for FD/RD account						Amount (Rs) for PPF account						Amount (Rs) for SSA account					
				.						.													

Existing Card Linkage: Customer can mention their Card No. to which they want to link this account
(Please note this facility is available for operating instruction: Single, Either or Survivor only)

[illegible]

	ATM Card	Debit Card (Charges Applicable)			
1st			Regular	Platinum	Other
2nd			Regular	Platinum	Other

Your CHIP Debit Card is activated for international & Domestic Usage.
Deactivation of International usage on Debit Card can be done through NetBanking / PhoneBanking

If Other mention Card Code

To be filled by Bank Staff Only

If Other mention Card Code
To be filled by Bank Staff Only

I / We wish to open ☐ Withdrawable FD ☐ Non Withdrawable FD ☐ Tax saving FD ☐ **SureCover FD (please attach annexure and refer T&C in detail)** ☐ RD as ticked below

Holding Pattern for FD / RD				Operating Instruction			
	1st Applicant only		2nd Applicant only		Single	Either or Survivor	Former or survivor
	1st & 2nd Applicant only		2nd & 1st Applicant		Minor under Guardian		Jointly

The advice will be received at your mailing address within 7-8 working days of account opening. Customer registered for email statement will receive FD advice through email.

In the event of death of the depositor, premature liquidation of the term deposit/s will be allowed. Such premature liquidation will not attract any penal charge. In the event of death of one of the Joint account holders, the right to the deposit proceeds does not automatically devolve on the surviving joint deposit account holder, unless there is a survivorship clause. I/we agree that in case of Joint Fixed Deposit with survivorship clause the bank shall be discharged by paying the fixed deposit proceeds prematurely to survivor/s, on request, in the event of death of one or more joint depositor.

[illegible][illegible]

Installments / FD booking and also credit the maturity / interest in the same account. I/We further understand that Super Saver or Sweep-In Facility, if requested will be activated in the same account.

I/We wish to have the maturity/interest payout through manager's cheque at my mailing address for the above FD/RD

*Convert to Fixed Deposit for tenure of 1 year 1 day Only Principal Principal + Interest *Deposit will be reinvestment of interest with maturity instruction as Renew Principal and Interest

*TDS Details for FD/RD: Deduct TDS (if applicable) ☐ Yes ☐ No If No, attach ☐ Form 15G/H ☐ Income Tax exemption letter ☐ Waiver marked on cust ID

1st Appl. Signature

2nd Appl. Signature

(K) INSTRUCTION FOR KIDS ADVANTAGE ACCOUNT / PPF ACCOUNT / SUKANYA SAMRIDDHI ACCOUNT

STANDING INSTRUCTION (SI) : I / We hereby request you to maintain a Standing Instruction from my/our

HDFC Bank A/C No. / New A/c (hereinafter referred as "funding a/c") for the amount Rs (Min Rs 1000/-)

Rupees (In Words) by way of Monthly Funds Transfer to the account of the minor / till the maturity of the PPF account.

Name of Funding Account Holder(s) :

* Next SI Date

* SI End Date

D D M M Y Y Y Y

Date of next SI to fund the account

D D M M Y Y Y Y

Date of last SI to fund the account

Please mention a date of minimum 10 days post submission of the form at the branch

Minimum duration - 1 year, SI can be maintained till the kid turns 18 years of age / Maturity of PPF account

ATM Card for Minor : Please issue

ATM Card

International Maestro Debit Card (with ATM Facility) to the minor. (Issued only if kid is in between 7-18 years)



Type of Guardian : Father Mother Court Appointed

Minor Declaration : I hereby declare that the date of birth of the minor who is my is dd mm yyyy and I am his / her natural and lawful guardian / guardian appointed by court order dated dd mm yyyy (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I declare that the amounts withdrawn from this account by me will be used for the benefit of the minor. I indemnify the bank against the claim of the above minor for any withdrawal / transactions made by me in his / her account.

(L) SWEEP- OUT INSTRUCTION FOR SAVINGS MAX / KIDS ADVANTAGE ACCOUNT / WOMENS SAVINGS ACCOUNT

SWEEP - OUT INSTRUCTIONS

I / We wish to avail sweep-out facility on this Savings Max / Kids advantage account / Womens Savings Account.

(M) NOMINATION (DA1)

(please fill separate nomination form if you wish to add a different nominee in any of the above accounts)

Yes, I/ We wish to nominate (as per details below) No, I/We declare that I do not wish to make a nomination in my/our account.

Nomination under Section 45 ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules 1985 in the respect of Bank deposits.

I / We nominate the following person to whom in the event of my/our/minor's death the amount of the above opened Account / Fixed Deposits / Recurring Deposits, may be returned by

HDFC BANK Ltd. by the account opening branch. This Nomination will be applicable for Savings / Current / Fixed Deposit / Recurring Deposit / KGC SB & CA / SSA.

Nominee Name

Flat No & Bldg Name

*Road No./Name

*Landmark

*City

*State

*Tel (R)

S T D - N U M B E R

Relationship with Depositor, if any

Date of Birth of Nominee

D D M M Y Y Y Y

Mobile

91

*PIN Code

Country

Please tick if mailing address is same as of the applicant

(N) FORM E : Application for nomination under the Public Provident Fund Scheme 1968.

(please fill separate nomination form if you wish to add multiple nominees)

Yes, I wish to nominate the person mentioned below to whom to the exclusion of all other persons in the event of my death, the amount standing to my credit in the PPF account at the time of my death would be payable (not applicable for minor account)

No, I declare that I do not wish to make a nomination in my account.

Nominee Name

Flat No & Bldg Name

*Road No./Name

*Landmark

*City

*State

*Tel (R)

S T D - N U M B E R

Relationship with Depositor, if any

Date of Birth of Nominee

D D M M Y Y Y Y

Mobile

91

*PIN Code

Country

Please tick if mailing address is same as of the applicant

(Leave out if nominee is not a minor)

As nominee is a minor on this date, I appoint

Name

Address

to receive the amount

of the deposit in the account on behalf of the nominee in the event of my/minor's death during the minority of the nominee.

Personal Details of the Witnesses (Thumb impression shall be attested by 2 witnesses)

Witness 1 Name Signature

Address Place Date

Witness 2 Name Signature

Address Place Date

(O) CLOSE RELATIVE DECLARATION (To be filled by the applicant if he/she do not have any address proof)

I hereby confirm that Mr./Ms. (* Applicant Name) who is desirous of opening an account with your Bank is my (* Relationship). He / She is residing with me since (*Month) (*Year) at the below mentioned address:

* Building Name * City

*State *Country * PIN Code *Telephone Number

The applicant does not hold a documentary address proof in his /her independent name. Since the applicant is residing with me, the address proof in my name is being provided to the bank for the purpose of address verification. I have no objection towards receiving any correspondence from the bank in the name of applicant at my above-mentioned address.

I enclose herewith the below:

1. Self-attested (*Document Name) as Identity Proof

2. Self-attested (*Document Name) as Address Proof

Name of the Declarant Cust ID (if an existing customer)

Declarant Signature

I/We confirm having received the Welcome Kit in an untampered / sealed condition and confirm that the below deliverable have been received by me.

1) Chequebook with 10 Cheque Leaves 2) Debit Card Pin 3) Netbanking Pin 4) Phone banking 5) International Debit Card 6) T & C booklet 7) Passbook

The Average Monthly / Quarterly / Half Yearly Balance required to be maintained for this account is Rs Product:

I/We have understood that non-maintenance of the above Average Monthly / Quarterly / Half Yearly Balance will attract charges . These charges have been explained to me for the respective Product .
I/We understand the detailed charging structure for non-maintenance and the same is available on HDFC bank's Website and Service charges and fees brochure.

(I) We have read and understood the Terms & Conditions governing the opening of an account with HDFC Bank and those relating to various services including but not limited to (A)ATMs, (B) Fixed deposit (C) PhoneBanking, (D) Debit Cards, (E) MobileBanking, (F) NetBanking, (G) BillPay facility, (H) InstaAlert facility, (I) Email Statement. I/We accept and agree to be bound by the said Terms & Conditions including those excluding/limiting the Bank's liability. I/We understand that the Bank may, at its sole discretion, amend any of the services completely or partially with atleast 30 days notice and/or provide an option to switch to other services to me. I/We agree that the Bank may debit my account for the service charges applicable from time to time. I/We confirm that I/We am/are resident of India. I/We authorise the bank to disclose from time to time information relating to my/our savings bank account to the Bank and its related entities, including but not limited to, HDFC Bank, HDFC Life Insurance Company Limited, HDFC Securities Private Limited, HDFC Asset Management Company Limited. I/We acknowledge that we have read the Terms and Conditions booklet which details the rules governing account operations, the Service charges and Fees Brochure which specifies the charges applicable from time to time for various services and there away Customer copy detailing the instructions and account opening rules. Netbanking and SMS Banking Services will be available to the customer upon opening of account with the Bank without requiring completion of any formalities. I/We hereby declare that the above address is my/our current and permanent residential address. In case of change of address due to relocation or any other reason, I/We would intimate the new address to the bank within two weeks of such a change with a valid address proof. I am interested in buying insurance policy/ies and would like to make enquiries for the same. I hereby consent to receive information /services through Telephone / Mobile /SMS / E-mail /any other mode of communication from

DO NOT CALL REGISTRY: I understand that in case I do not wish to receive promotional information through telephone calls / email / sms on products and services not currently availed by me, I can register for "Do Not Call" service through the Bank's website www.hdfcbank.com or other channels that the Bank may offer. I agree that this service will not apply to receipt of advice and information regarding products and services currently availed by me, to help me in fully realising the benefits of the range of financial solutions designed to make my banking relationship value added and more convenient.

PPF: I agree to abide by the provisions of the Public Provident Fund Scheme, 1968 and amendments issued thereto from time to time. I declare that I do not maintain any other Public Provident Fund Account in any other Bank or Post Office. Minimum amount of subscription / deposit for a financial year is Rs. 500 and maximum amount is Rs. 1,50,000. Maximum of 12 subscriptions / deposits can be done in a financial year. Tenure of the account is 15 years. For further details refer terms and conditions available on the website.

Aadhaar : I/We hereby submit voluntarily at my/our own discretion, the physical copy of Aadhaar card/physical e-Aadhaar / masked Aadhaar / offline electronic Aadhaar xml as issued by UIDAI (Aadhaar), to HDFC Bank for the purpose of establishing my/our identity / address proof and voluntarily give my/our consent to open account / process instructions for the said purpose with HDFC Bank in my/our name/s individual capacity/ies using my/our Aadhaar or as an authorized signatory in non-individual accounts and; hereby consent to HDFC Bank for verification of my/our Aadhaar to establish its genuineness through Quick Response (QR) code embedded in the Aadhaar card or through such other acceptable manner as per UIDAI or under any Act or law from time to time. The consent and purpose of collecting Aadhaar has been explained to me/us in local language. HDFC Bank has informed me/us that my/our Aadhaar submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law. HDFC Bank has informed me/us that this consent and my/our Aadhaar will be stored along with my/our account details within the bank. I/We hereby declare that all the information voluntarily furnished by me/us is true, correct and complete. I/We will not hold HDFC Bank or any of its officials responsible in case of any incorrect information provided by me/us.

Authentication Type	1st Applicant	2nd Applicant
e-KYC OTP	<input type="text"/>	<input type="text"/>
e-KYC Biometric	<input type="text"/>	<input type="text"/>
e-KYC IRIS	<input type="text"/>	<input type="text"/>
Certified Copies	<input type="text"/>	<input type="text"/>

Do not sign this form if it is BLANK, please ensure all relevant sections are complete filled to your satisfaction and then only sign the form

1st Applicant Signature		2nd Applicant Signature Guardian signature in case of minor	
Name:	Date:	Name:	Date:

I/We confirm that I/we have read and understood the above Declaration, and that the details provided on the form are correct. I/We also confirm that my account been opened by Bank officer Mr./Ms. _____ and I / we have signed in his/her presence.

[illegible]

Customer ID										Customer Category		Document Submitted								Branch Codes					
1st Applicant												ID Proof		Add Proof		Photo		No cheque book to be issued		CPV Initiated	Sourcing				
2nd Applicant												ID Proof		Add Proof		Photo		Tatkal Kit issued for Existing customer			Servicing				

Group ID	Portfolio Code	Program to be raised to

Service ID / Emp.Code ^	Company Code	LG CODE	LC CODE	MIS Code

^ (For Defence Accounts Only)

[illegible][illegible]

CUSTOMER SIGNED IN MY PRESENCE	Emp Name		Signature	TELE CONFIRMATION DONE	Emp Name		Signature
	Emp Code				Emp Code		

<input type="checkbox"/> PAN Verification done <input type="checkbox"/> UCIC check done <input type="checkbox"/> Banned Dedupe check done	Branch Stamp with Date <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
PB/RM Signature & Date <div style="border: 1px solid black; height: 100px; width: 100%;"></div>	BDA / BM Signature & Date <div style="border: 1px solid black; height: 100px; width: 100%;"></div>

<p>CPU Stamp with Date</p>	
<p>DVU Signature & Date</p>	<p>FCU Signature & Date</p>

Customer Copy

Instructions Overleaf

Dear Customer,

As per RBI guidelines Banks are advised to exercise due diligence by closely examining the transactions carried out in the account on an ongoing basis. This is done in order to ensure that the transactions are in sync with the customer profile as provided while opening the account. Hence it is imperative that the Profile details provided by you is correct and accurate. It is very important for your profile details to correspond / match with the transaction pattern and balances in your account. Basis the information provided, the Bank shall review the transaction pattern in your account which would be used to report transactions of suspicious nature if any. Should there be any change in your Profile details, request you to please visit your nearest HDFC Bank Branch and update the details.

Please quote this reference no. for any future communication.

Nomination taken

Date:

D	D	M	M	Y	Y	Y	Y
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Signature of Bank official

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Instructions:

Welcome Kit would be delivered to the addressee only on the mailing address provided. If you do not receive your welcome kit within 2 weeks of the date of acknowledgement, kindly e-mail at www.hdfcbank.com/services or contact the nearest branch. The PIN number for the ATM/Debit card for carrying out transactions on the ATM will be despatched to your mailing address by post. We request you to maintain confidentiality of the PIN number and the bank would not be held liable for misuse of PIN number.

ACCOUNT OPENING RULES

- All necessary documentation as mandated by the Regulatory/Bank authorities should be provided for opening the accounts.
- In event of no Salary Credits for any continuous three months, the Salary Account will be converted to Savings Regular Account and Fees and charges of Saving Regular Account will be applicable
- All accounts should maintain the stipulated average monthly balance based on the product program and branch in which the account is opened.
- In case of non-maintenance of the stipulated average monthly balance, charges as outlined in the Service Charges & Fees Brochure from time to time will be applicable. * Savings accounts can be opened only by individuals for non-business purposes.
- In case of any query / suggestion / feedback / complaint relating to features of any of the products, you may write to www.hdfcbank.com/services or call up local Phone Banking number.

* Business/Trading/Partnership/Proprietary/Company/Corporations cannot open a savings account. Trusts/Societies/Charitable/Educational Institutions may open a savings account subject to conditions. The bank reserves the right to close the account incase the savings account is used for business purposes as evinced by the transaction behaviour. * Cheque book of 10 leaves & 50 leaves will be issued to Savings and Current a/c holders respectively by default. *Savings accounts will be issued only 25 cheque leaves per calendar quarter. The branch manager can be contacted for additional cheque leaves at a nominal charge. * Adequate balance should be maintained in the account before issuing a cheque. * Details of charges on funds transfer, inter branch banking and other services are available in the Service Charges & Fees Brochure. * Copy of the Terms & Conditions, Service Charges & Fees Brochure and the Code of Bank's Commitment for Individual Customers can be obtained from the branch/website. * Interest on Savings account will be paid at the rate stipulated by RBI from time to time. * No unarranged overdraft would be allowed in the Savings account. In case of exceptions, the bank would charge interest at commercial rate. *The bank reserves the right to close the account in case of unsatisfactory conduct of the account. * In the event of the death of one of the joint account holders, the right to the deposit proceeds does not automatically devolve on the surviving joint depositor account holder, unless there is a survivorship clause. * The deposits of the bank are insured with DICGC and in case of liquidation of the bank, DICGC is liable to pay each depositor through the liquidator, the amount of his deposit upto Rupees one lakh within two months from the date of claim list from the liquidator. * For availing passbook facility, please visit your home branch.

* In terms of Reserve Bank of India Directives, interest will be calculated at quarterly intervals on Term Deposits and paid at the rate decided by the bank depending upon the period of deposits. In case of Monthly Deposit Scheme, the interest will be calculated for the quarter and paid monthly at discounted value. * In case of premature withdrawal of the fixed deposit based on depositor's instructions or the instructions of all the joint depositors in the case of joint deposit, the bank has the right to recover interest already paid or the penalty, if any, from the proceeds of the fixed deposit in accordance with prevailing regulations of the bank and the Reserve Bank of India. * The Deposits of the bank are insured with DICGC and in case of liquidation of the bank, DICGC is liable to pay each depositor through the liquidator, the amount of his deposit upto Rupees one lakh within two months from the date of claim list from the liquidator. In case of any query / suggestion / feedback / complaint relating to features of any of the products, you may write to www.hdfcbank.com/services or call up local phone banking number. * HDFC Bank computes interest based on the actual number of days in a year. In case, the Deposit is spread over a leap and a non-leap year, the interest is calculated based on the number of days i.e., 366 days in a leap year & 365 days in a non leap year. The TAT for processing the Fixed Deposit request is 3-5 working days. The Fixed Deposit advice will be dispatched to your recorded mailing address within 7-8 working days of account opening.

Penalty of 1% pa will be levied on premature closure of Fixed Deposits (including sweep-in/partial closures). This is subject to terms & conditions.

In the absence of any maturity instruction, the deposit will be renewed for a period equal to that of the original deposit at the prevailing rate on the date of renewal.

In case the super saver facility is withdrawn, the depositor has to maintain the stipulated average monthly balance for that entire month and also in subsequent months.

Issuance of SureCover FD is subject to the T&C being signed by customer via separate annexure & submitted at the nearest branch

The detailed T&C related to "SureCover FD" can also be viewed by customer on the website(www.hdfcbank.com>useful links>Terms and Conditions)

Sweep - Out Instructions: Sweep-In facility is automatically available for fixed deposit booked through sweep-out. PAN No. is mandatory for Sweep-out options and will be triggered every Monday beginning of day. Under Sweep-out option for Kids Advantage: If balance >= Rs. 35,000/- then amount in excess of Rs. 25,000/- will be booked as FD in Kids name for 1 year and 1 day at applicable interest rate. Under Savings Max: if the balance >= Rs. 1,25,000/-, then amount in excess of Rs. 1,00,000/- and under Women's Savings Account : if balance >= Rs. 1,00,000/- then amount in excess of RS. 75,000/-, All FD will be booked for 1 year and 1 day. For SBMAX & Women's Savings Account, the minimum FD value is Rs. 25,000/-

*Nomination details provided for the funding saving account will be replicated for all sweep-out deposit's.