

**“Form for opening of No Frill account under Financial Inclusion Program
(through Business Correspondent)”**

Under PBG / ABG

Scheme Code: **RSFIN** Label Code: _____

Name of the BC: _____

To, Branch Manager

IDBI Bank Ltd

_____ Branch (Sol ID _____)

A/P: _____ Dist: _____ Pin Code: _____

Dear Sir/ Madam

I/we have no account in any bank. Please open an account in my / our name/s in your branch of IDBI bank. I /We will follow all the prevailing rules and regulations of the bank, as well as, prevailing from time to time. Address proof and introduction are provided herewith as under. I agree & abide that the responsibility of submitting the necessary documents for operation of this account and in terms of KYC norms for this account will be entirely on me. For relaxed KYC for this account I am aware that if, at any point of time, the balances in all my/our accounts with the bank (taken together) exceeds Rs.50,000/- (Rs. fifty thousand only) or total credit in the account exceeds Rs. 1,00,000/- (Rs. one lakh only) no further transactions will be permitted until the full KYC procedure is completed.

My details are as under:

Name 1) Mr. / Ms _____ Age _____ Occupation _____

Name 2) Mr. / Ms _____ Age _____ Occupation _____

Address 1) _____

2) _____

Mobile No. _____ Tel. No. _____

Telex/Fax No. _____

Signature 1) _____ Signature 2) _____

- In case of thumb impression two witnesses are required
- In case of account of minor, details such as Name of Guardian and relation with the minor are required as under.

Name of the Guardian _____ Relationship with Minor _____

- **Instruction in respect of Joint Accounts :** Account will be operated by Jointly Anyone Singly Either or Survivor
(Tick which is appropriate and strike off which is not applicable)

Name of the Nominee _____ Age _____ Relationship with account holder _____

Address of Nominee _____

In case the Nominee/ Applicant is minor,

DOB: ___/___/____. Name of the Natural Guardian _____ Relationship with Minor _____

Certificate of introduction

This is to certify that the occupation of Mr./Ms. _____ is _____

He is a habitant of _____ Village and I know him for last _____ years.

Name and Address of the Introducer: _____ Signature _____

Date: _____ Signature _____

Introduction Certificate from Local Authority for Residential address

This is to certify that this photograph is of Mr. / Ms. _____ and he/she is a habitant of _____ Village.

Date: _____ (Name & Address of the Authority _____)

Signature with Rubber Stamp _____

(For Office use only)

IDBI Bank Ltd., Branch _____ Account No. _____

Name & EIN of the official _____ Signature _____

(Signature verified and account opened)

Affix Customer Photo
Obtain Signature of the Customer/s
across the Photo.