

Account Opening Form (Prathilabha) Savings Account - Individual & Joint

The Manager
HDFC Bank

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Please open a SAVINGS account in my/our name

For Office Use Only

CIF No. 1 :

CIF No. 2 :

Joint CIF No. :

A/C No :

Date :



PERSONAL INFORMATION	PRIMARY APPLICANT	JOINT APPLICANT	
Name in Full (Rev. /Mr./Mrs./Miss./Dr.)			
NIC No			
Date of Birth	D D M M Y Y Y Y	D D M M Y Y Y Y	
Permanent Address			
Mailing Address <i>*(Select any one of it)</i>	<input type="checkbox"/> Permanent <input type="checkbox"/> Communication	<input type="checkbox"/> Permanent <input type="checkbox"/> Communication	
Relationship to the Primary Applicant	Contact No 1. 2.	Contact No 1. 2.	
Income Tax File No <i>*(For Income Tax Payers only)</i>			
Operated By	<input type="checkbox"/> Primary/Joint Account Holder Only.	<input type="checkbox"/> Both Together	<input type="checkbox"/> Any one of us
Purpose for Opening the Account and the usage			

OTHER SERVICES

I. ATM Card Required: Yes / No

*Other HDFC Accounts to be linked other than primary account

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*Mother's Maiden Name

II. Internet Banking Facility Required: Yes / No

III. Pass Book Required: Yes/No

IV. A/C Statement Required : Yes/No

Required Frequency

Daily Monthly Quarterly Half yearly Yearly

Email Address :

TERMS & CONDITIONS

- | | |
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| <p>1. The HAT Card shall at all times remain the property of HDFC Bank and shall be returned to the Bank unconditionally and immediately on the request of the Bank.</p> <p>2. The use of the card will be exclusively restricted to the person named overleaf as it is not transferable.</p> <p>3. At no time and under no circumstances should the Card holder disclose to any person the Personal Identification Number/s (PIN NO/S) allotted to me/us.</p> <p>4. Do not use or attempt to use the Card unless there are sufficient funds in my/our account to cover the withdrawal or transfer</p> <p>5. To immediately notify the Bank of the loss or theft of the Card</p> <p>6. The Bank reserves the right to vary any terms and Conditions.</p> <p>7. Not to use or attempt to use the Card after any notification of its cancellation or withdrawal has been given to me/us by the Bank or by any person acting on behalf of the Bank.</p> <p>8. To accept full responsibility for all transactions processed from the use of the Card except any transactions occurring after the Bank has confirmed to me/us that it has received notice of loss or theft of the Card or of unauthorized acquisition of the Personal Identification Number.</p> <p>9. Subject to (7) above to accept the Bank's record of withdrawals and/or transfers as conclusive and binding for all purpose and authorize the Bank to debit my/our account with all amounts withdrawn or transferred with or without my/our knowledge or authority.</p> <p>10. To acknowledge that the amount started on the ATM Screen or a printed inquiry slip or receipt advice shall not for any purpose whatsoever be taken as conclusive of the state of my/our account with the Bank.</p> <p>11. Not to hold the Bank liable, responsible or accountable in any way whatsoever for any loss or damage howsoever arising, caused by any malfunction or failure of the Card or the ATM or the insufficiency of funds in the ATM.</p> <p>12. Notwithstanding and without prejudice to the generality of the provisions of (11) above the use of the Card shall be at my/our sole risk and I/We accept any and all risks incidental to or arising out of the use of the Card.</p> | <p>13. I hereby authorize you to debit my account with the amount of any withdrawal, transfer or payment made by the use of the HAT Card with the use of my PIN with or without my knowledge or authority.</p> <p>14. The Bank will be not responsible for the Card not being honoured for any reason whatsoever</p> <p>15. I further authorize you to debit my account with all charges relating to the transactions made internationally and/or through any other local networks and any other liabilities, charges, legal fees relating to the card or usage of Card.</p> <p>16. To return the Card for cancellation should be no longer required or should my/our account with the Bank for any reason be closed.</p> <p>17. That the Bank shall be at liberty to terminate the facility at any time without notice to me/us by cancelling or refusing to renew the Card.</p> <p>18. Cash and/or cheques deposited by use of the Card will only be credited to my/our account after verification by the Bank. The statement issued by the Automated Teller Machine at the time of deposit will only represent what I/We purported to have deposited and shall not be binding on the Bank. The Bank's count of the amount contained in the envelope shall be conclusive. Cheques will be accepted for collection only and proceed will not be available for drawing until the cheques are cleared and realized</p> <p>19. Joint Account Holders are inter alia jointly & severally bound by these terms and conditions and are liable for all transactions processed by the use of the Card.</p> <p>20. All rules and regulations governing the operation of Savings or any other account shall be applicable to Card transactions relating to such accounts.</p> <p>21. I/We undertake not to use this Card to make payment for purchases of Real Estate or Financial Assets overseas.</p> <p>22. The Bank will charge Rs.100/- for issuing a new card in place of stolen or misplaced card.</p> <p>23. The Bank reserves the right to set off all monies in the savings account at any time against the amount due / owing / payable to the bank by depositor/s.</p> |
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NOMINEE

Full Name of Nominee	1	2
NIC No.		
Payment %		
Address		
Contact No		

Make arrangements to pay the balance of the account to following nominees in the event of my/our death.

CUSTOMER DECLARATION

I/We have read & understood the rules & regulations for the conduct of this account and I/We hereby agree to comply with and be bound by the rules and regulations made or imposed by the Bank with regard to this account and which may come into effect and be enforced by the Bank from time to time notwithstanding the fact that such rules and regulations have not been personally notified to me/us.

.....
Primary Applicant Signature

.....
Joint Applicant Signature

.....
Date

BANK USE ONLY

Product Code

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Copy of NIC/PP

Recent Utility Bills (Specify)

Letter from a Public Authority

Name

Signature

Date

Data Checked and Input By :

System Authorized By :

Branch Manager :

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