





**Maiden Name\*** (if any)   
**Father / Spouse Name\***   
**Mother Name\***   
**Date of Birth\***  /  /  **Gender\***  Male  Female  Transgender  
**Marital Status\***  Married  Unmarried  Others  
**Occupation Type\***  Service ( Private  Public  Government)  Business  Others ( Professional  
 Self-employed - Agriculture  Self-employed - Others  Retired  Housewife  Student)  
 Not Categorized. (Please specify) \_\_\_\_\_  
**Category**  General  OBC  SC  ST  Minority  
**Education**  Under-Graduate  Graduate  Post Graduate  
**Gross Annual Income**  Less than 60K  60K - 1L  1L - 5L  5L - 15L  More than 15L

**2. PROOF OF IDENTITY (Pol)\*** (Certified copy of any one of the following POI needs to be submitted)

Passport No.	<input type="text"/>	Expiry Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
Voter ID No.	<input type="text"/>		
PAN Card* <sup>^</sup>	<input type="text"/>	If you do not have a PAN, please complete a Form 60 / 61	
Driving License	<input type="text"/>	Expiry Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
Aadhaar	<input type="text"/>		
<input type="checkbox"/> Please link this account to my Aadhaar for benefits transfer (Attached 'Aadhaar linking' form duly filled and signed)			
NREGA Job Card	<input type="text"/>		
Others **	<input type="text"/>	** Any document notified by the Central Government	
Simplified Measures Account ***	<input type="text"/>	*** Identity card with applicant's photograph issued by Central / State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions <b>OR</b> Letter issued by a gazetted officer, with a duly attested photograph of the person.	

(<sup>^</sup>PAN has to be submitted by the customer even if he / she submits a Pol other than PAN)

**3. PROOF OF ADDRESS (PoA)\***

**3A. PERMANENT ADDRESS** (Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

**Address type\***  Residential / Business  Residential  Business  Registered Office  Unspecified  
**Proof of Address\***  Passport  Driving License  Aadhaar  Voter Identity Card  NREGA Job Card  
 Simplified Measures Account  Others \_\_\_\_\_

**Line 1\***   
**Line 2**  **City / Town / Village\***   
**District\***  **State\***  **PIN Code\***

**3B. COMMUNICATION ADDRESS**  Same as Permanent Address

**Line 1\***   
**Line 2**  **City / Town / Village\***   
**District\***  **State\***  **PIN Code\***   
**Tel (Res)**  -  **Email ID**   
**Mobile (if any)\* +91-**  (This number will be used for alerts, mobile banking and USSD)

\* Above fields are Mandatory





I / We hereby declare that the details furnished above are true and correct to the best of my / our knowledge and belief, and I / we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I / We am aware that I / we may be held liable for it.

I / We confirm that I / we want to avail the Debit Card facility along with this Savings account by accepting the said instrument when it would be delivered to me / us by the Bank. I / We understand the account balance in my / our Savings account cannot exceed Rs.1,00,000 at any point in time.

I / We confirm that IPPB reserves the right to disallow any credit transaction which increases the account balance beyond Rs.1,00,000 and take remedial measures as required.

For ILLITERATES only,

I / We hereby confirm that the contents of this form including the Terms & Conditions have been understood by me / us and the same has been explained to me / us in local language.

Affix photograph of 1<sup>st</sup> Applicant with signature / thumb impression across

Affix photograph of 2<sup>nd</sup> Applicant with signature / thumb impression across

Signature / Thumb impression of 1<sup>st</sup> Applicant

Signature / Thumb impression of 2<sup>nd</sup> Applicant

Name \_\_\_\_\_

Name \_\_\_\_\_

Date □□/□□/□□□□

Date □□/□□/□□□□

**FOR BANK USE ONLY**

I hereby certify that this Account Opening Form is complete in all respect. All KYC checks have been completed and relevant documents have been obtained. The account may please be set up in the Core Banking System. I hereby certify that I have read out the contents of Account Opening Form in local language and the applicant(s) has / have understood the same.

CIF ID No. 1 □□□□□□□□□□ CIF ID No. 2 □□□□□□□□□□

Primary Applicant Name \_\_\_\_\_ Account No. □□□□□□□□□□□□□□□□

**INITIAL DEPOSIT DETAILS**  Cash Rs. □□□□□□

Cheque / DD No. \_\_\_\_\_ dated \_\_\_\_\_ drawn on \_\_\_\_\_ Bank, \_\_\_\_\_ Branch \_\_\_\_\_

Name of the Bank Authorized Official \_\_\_\_\_ Official ID \_\_\_\_\_

Signature of the Bank Authorized Official \_\_\_\_\_ Date □□/□□/□□□□

**CUSTOMER ACKNOWLEDGEMENT SLIP** For Account Opening (Minors)

CIF ID No. 1 □□□□□□□□□□ CIF ID No. 2 □□□□□□□□□□

Primary Applicant Name \_\_\_\_\_ Account Number □□□□□□□□□□□□□□□□

**INITIAL DEPOSIT DETAILS**  Cash Rs. □□□□□□

Cheque / DD No. \_\_\_\_\_ dated \_\_\_\_\_ drawn on \_\_\_\_\_ Bank, \_\_\_\_\_ Branch \_\_\_\_\_

Name of the Bank Authorized Official \_\_\_\_\_ Official ID \_\_\_\_\_

Signature of the Bank Authorized Official \_\_\_\_\_ Date □□/□□/□□□□

\* Above fields are Mandatory