



Customer Request Form

Bank: Branch: Date*:

1st Applicant's Name*:

2nd Applicant's Name*:

Account number: Mobile Number:

(Fields Marked * are Mandatory)

Kindly fill only those boxes where information is to be added or updated. On submission of form always ask for acknowledgement (Kindly tick the boxes against the request opted for)

ADD/UPDATE PERSONAL DETAILS

1. Update KYC ID Type: PAN Aadhar Driving License Passport Voter ID NREGA Card

1A. Update Date of Birth

Document number.....(Attach self-attested copy of document for verification with original)

Place of Issue Issue Date Valid till date

2. Address Change: Permanent Correspondence Both (Please leave space between two words/digits)

Address Line 1: Address Line 1:

Address Line 2: Address Line 2:

Address Line 3: Address Line 3:

Document Type: PAN Aadhar Driving License Passport Voter ID NREGA Card

(Mandatory for Permanent Address Change)

3. Addition/Deletion of Name..... (Relation.....)

KYC Document Number.....Valid up to.....Place of issue.....

PAN/Form 60 (Attach self-attested copy of document for verification with original) after addition/delation of name mode of operation in account will be.....

4. Please seed/update my Aadhar Number in the account number mentioned above for DBT purpose:

5. Please delete my Aadhar Data from the account Number mentioned above, my Aadhar No.is

6. PAN:

7. Email ID:

8. Change my Title to:

9. Change my Name to:

(Relevant document e.g. Govt. Gazette Notification / Marriage Certificate to be attached)

OTHER ACCOUNT/CIF MODIFICATIONS

11. Transfer Account CIF Both To Branch Name Branch Code:

12. Change mode of operation in above mentioned account to:

Self Either or Survivor Former or Survivor Jointly As per mandate enclosed

13. Request to activate my inoperative/Dormant account (number mentioned above):

Reason for dormancy:

14. Convert my account from Minor to Major as I became Major on

15. Change A/c Type to: **Salary Package Variant: Corporate/Others** **Savings Bank to NRO Savings Bank**

Current Account Variant: Regular/ Premium/Privilege/.....

16. Change my signature in above mentioned account:

From	OLD SIGNATURE	To	NEW SIGNATURE
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17. I/we request to close above account and pay the balance by: Cash/ Credit to account no.

FIXED DEPOSIT/PPF ACCOUNT RELATED SERVICES

18. Please change the tenure of my/our Fixed deposit A/C No. to

19. Reissue Term Deposit advice for A/C number:

20. Please issue TDS/Interest certificate for Account Number/s:

OTHER ACCOUNT RELATED SERVICES

21. Passbook required: Yes/No [If No, Request for statement of account through e-mail id.

22. Request to Issue Duplicate Passbook for the Account Number:

23. Request to activate Phone Banking/Mobile Banking services in the above-mentioned account.

24. Standing Instruction: Please transfer Rs. to RD/Loan/SB Account Number:

Starting from date Every alternate **Daily/Monthly/End of Month**

25. Setup Auto-sweep facility - Saving Threshold amount: **As per scheme**

Sweep time: **As per scheme**

Under reverse sweep facility the MOD (Multi-option deposit) to be broken by: **Last in First Out**

NOMINATION

26. Nomination to be modified in my account mentioned above: **New/Change/Delete**

(Please fill and attach DA-1 form for new nomination, DA-2 form to delete nomination and DA-3 form to change nomination)

27. Nomination to be modified: [Add/Modify] in the scheme **APY/PMJJBY/PMSBY/PPF**

APY RELATED SERVICES

28. Request to update the pension amount for APY from Rs to 1000/2000/3000/4000/5000

I hereby authorize the bank to debit my above mentioned bank account till the age of 60 for making payment under APY as applicable based on my age and the Pension Amounts selected by me.

CHEQUE RELATED SERVICES

29. Cheque book facility: Please provide cheque book facility in my account number mentioned above.

30. New personalized cheque book request: Number of leaflets:

Name on cheque:

Address to be delivered to: **Permanent/Correspondence/New**

Address line 1:

Address line 2:

Address line 3:

31. Request to stop (number of cheques) Cheque number listed below/attached

Starting from ending at or Cheque number:

Cheque number: Cheque number:

Cheque number: Cheque number:

DEBIT CARD SERVICES

32. ATM card issuance (Charges will be deducted as applicable): **New/Replace**

Address to be delivered to: Permanent/Correspondence

Name on card:

33. Block / Unblock debit card number:

INTERNET BANKING SERVICES

34. Activate Internet Banking in the above mentioned account.

Kit number (for official use only):

35. Request to: Reactivate the username/Re-issue login password/Reset the INB profile password

Date of Birth:

36. Internet Banking rights modification : Full Transaction rights

37. Request to add beneficiary to INB : Not Applicable

Reference Number: Beneficiary name: Beneficiary account No :

Beneficiary Bank/Branch:IFS Code: Limit (INR): Rs:

PENSION SERVICES

38. I wish to submit Life Certificate for PPO no:

39. Please issue Pension Certificate/Slip for PPO no: for the Month.....Year.....

40. Please issue Form 16 for PPO no:

41. Pensioners Grievances (Pension not credited/Life Certificate not updated)

LOCKER SERVICES

42. Request for Allotment of Locker: (Size): Small/Medium/Large/Extra Large

43. Request to add Nomination to Locker number:(Duly filled in nomination form is to be attached)

44. Request for Locker Conversion from Single to Joint: Locker No.

Name of Joint Holder:

Account no. of Joint Holder:

45. Request for closure (Surrender) of Locker No: Bearing Key No:

46. Request for break open of Locker No:

I have read, understood and agree to the Terms and Conditions of various products and services including SMS alerts, Debit card and Internet Banking. I accept and agree to be bounded by the Terms and Conditions as displayed on www.bankofbaroda.co.in. I agree that the bank may debit service charges plus taxes to my account whenever applicable. I wish to seed this account with NPCI mapper to enable me to receive Direct Benefit Transfer (DBT) including LPG Subsidy from Govt of India (GOI) in this account.

Kindly provide the number of Requests submitted (count and enter number of ticks in the checkboxes)*:

First account holder's signature

Second account holder's signature

Signature of Branch Official with SS No.

ACKNOWLEDGEMENT

Date of Request Received: Customer Name:

Employee Number: Name of Branch Official: Signature:

Please note: Your request will be processed within 2 working days. Delivery of Password /cheque book etc. to your address will take between 7-15 working days (depending on delivery location)