





FORM - 1 (Application for opening an account)

To	\ 11	
The Branch Manager		
		Paste photograph of
•••••		Applicant/s
C:		
Sir,	(A = 1; - = +/-= = 1; - =) 1; - = 1; - = = 1; - f = = = = ; - =	-6t
	(Applicant/guardian) hereby apply for opening	
	Sukanya Samriddh	i Account Scheme in your
Bank.		
I tandan hanassith Da	/-	
) in each/Chagua/DD
	Anto an initial demant May negative laws are as	
No	date as initial deposit. My particulars are as	under:-
1 N C4 D	•.	
	sitor	
Date of Birth		
	(DD / MM / YYYY)	
	(In words)	
	1	•••••
Husband/Father /n	nother's name	
Date of Birth		
	(DD / MM / YYYY)	
	(In words)	
3. Aadhaar Number	of guardian	
4. Permanent Accoun	nt Number (PAN) of guardian	
•••••		
5. Present Address		
Permanent Addres	S	
	~	
6. Contact details	Telephone Number	
o. Comaci uctans	Mobile Number	
	Email ID	
7 True of A	Min ar	
7. Type of Account	Minor	

8. (*) Details of Birth Certificate of the depositor
a) Certificate No.
b) Date of Issue
c) Issuing authority
9. Details of other KYC documents attached 1. Proof of identification
2. Address proof
(The following documents are accepted as valid documents for the purpose of identification and address
proof: 1. Passport 2. Driving license 3. Voter's ID card 4. Job card issued by NREGA signed by the State
Government officer 5. Letter issued by the National Population Register containing details of name and address;
10. The operation of the account will be: -(a) By the Guardian till the depositor attains majority.(b) By the depositor herself on attaining majority,
11. Specimen Signatures 1
(Name)
I hereby declare that I have not opened a Sukanya Samriddhi Account in the name of the depositor mentioned at serial number 1 in any of the Post office/Bank in the country.
I further declare that I and the depositor both are Resident citizen of India and undertake to inform the account office of any change in our residency/citizenship status in future.
I hereby undertake to abide by the scheme provisions and Government Savings Promotion Rules, 2018 applicable on the Scheme and amendments issued thereto from time to time.
Signature or thumb impression of guardian Date:

Nomination

	exclusion of all c		•			
S.No.	Name(s) of the nominee(s) and relationship	Full address (s)	Aadhaar number of nominee (optional)	Date of birth of nominee in case of minor	Share of entitlement	Nature of entitlement Trustee or owner
1						
2						
3						
4						
to rof the nomine 1. Signature of Name & Addi 2. Signature of Name of Name	receive the sum of e(s). f witness f witness f witness	due under the sa	id account in t			
Place: Date:			Signature o	r thumb impres	sion of guardia	n
		For use	of Post Office/	Bank		
With initial de	as been opened eposit of Rs			with Acco	ount	
Customer ider	ntification Numb	oer				
No	as been registere	dated.				
J	F 300					