

APPLICATION FORM FOR DEPOSITS (INDIVIDUALS)

PLEASE USE BLOCK LETTERS AND TICK IN APPROPRIATE PLACES (PREFERABLY IN BLACK INK)

Agents are not permitted to accept cash with application form and issue receipt.
HDFC will in no way be responsible for such or other wrong tenders.

Date : _____

Affix a latest photograph with signature.
(DO NOT STAPLE)

IGNORE if already submitted earlier

I/We apply for placement/renewal of deposit at _____ Branch
for a period of _____ months and will earn interest @ _____ % p.a. The payment details are as under :

PAYMENT DETAILS Cheque RTGS UTR No. _____
Cheque No. _____ Date: _____ Amount: ₹ _____

Bank Name _____ Branch : _____

HDFC Deposit Receipt No. _____ Maturity Date _____
(In case of Renewal)

FIXED RATE INTEREST **VARIABLE RATE INTEREST**

SCHEME :

- ANNUAL INCOME PLAN
- MONTHLY INCOME PLAN
- NON-CUMULATIVE (Quarterly)
- NON-CUMULATIVE (Half Yearly)
- CUMULATIVE

STATUS :

- Resident Individual
- Hindu Undivided Family

CATEGORY :

- Member of Public
- Shareholder
- Director/Relative of a Director
- Employee (No. _____)

DEPOSIT REPAYABLE TO :

- First Depositor
- First Depositor or Survivor/s

SENIOR CITIZENS (60 years & above)

YES NO

Gender M / F _____ Date of Birth (Compulsory) _____

Depositor's Name (in Block Letters) (as appearing in your supplied identification document)

1.				
Guardian's Name: <i>(in case of Minor)</i>				
2.				
3.				

Income-tax Permanent Account No. (PAN) for 1st Depositor : _____

If 'KNOW YOUR CUSTOMER (KYC)' information is already submitted, Please Mention Your Customer Number

for 1st Depositor: _____ **OR Kindly Submit Proof of Identity and Residence for our records.**

Proof of Identity to be provided by Applicant. (Please submit **ANY ONE** of the following certified documents)

- Passport Photo PAN Card Driving License Voter's Identity Card Photo Ration Card
- Photo Debit/Credit Card issued by bank Any other Identification with Photograph (Subject to satisfaction of HDFC)

ADDRESS OF FIRST/SOLE DEPOSITOR

Flat No. & Bldg. Name				
Road No. / Name				
City			Pin Code	
State			Country	

Proof of Address to be provided by Applicant. (Please submit **ANY ONE** of the following certified documents)

- Latest Telephone Bill of Land line / Mobile Latest Electricity / Gas Bill Latest Bank Account Statement Ration Card
- Latest Demat Account Statement Registered Rent Agreement Any other Address Proof (Subject to satisfaction of HDFC)

Email/SMS alerts for all transactions relating to my deposit/s with HDFC may be sent to the following :

Mobile: _____ STD Code _____ Tel. (R): _____
E-mail: _____

DETAILS OF BANK ACCOUNT

Bank Account No. _____	Name of Bank : _____
MICR Code : _____	Branch : _____
IFSC Code : _____	Account: <input type="checkbox"/> Savings <input type="checkbox"/> Current

FOR OFFICE USE ONLY

Deposit Receipt No.	Document Reference No.	Date of Receipt	Date of Deposit	Checked by	Authorised by

Tax to be deducted Yes No. If No, Please submit Form 15G OR Form 15H (for 60 years of age and above).
(PAN is compulsory on Form 15G or Form 15H)

Details of other deposits with HDFC :

Deposit Receipt No(s) : _____ Amount(s) : _____

(Attach a separate sheet, if necessary)

Other Details

1. **Gross Annual Income Details** Please tick (✓)

Upto ₹ 2,00,000 ₹ 2,00,001 to ₹ 5,00,000 ₹ 5,00,001 to ₹ 10,00,000 ₹ 10,00,001 to ₹ 25,00,000 ₹. 25,00,001 and above

2. **a. Occupation Details** Please tick (✓) **any one**

Private Sector Service Public Sector / Government Service Business Professional Agriculturist Retired Housewife
 Student Others (Please specify) _____

b. If the following is additionally applicable to you Please tick (✓) **one or more** as applicable

Civil Servant Bureaucrat Current or Former MP, MLA or MLC Politician Current or Former Head of State

I/We hereby declare that the first named depositor mentioned in my/our application is the beneficial owner of this deposit and as such he/she should be treated as the payee for the purpose of tax deduction under Section 194A of the Income Tax Act, 1961. I/We hereby agree to abide by the attached terms and conditions governing the deposit.

I/We have gone through the financial and other statements/particulars/representations furnished/made by the Corporation and after careful consideration, I/We am/are making the deposit with the Corporation at my/our own risk and volition.

I/We further declare that, I/We am/are authorized to make this deposit in the above-mentioned scheme (HDFC Deposit) and that the amount kept in the deposit is through legitimate source and does not involve directly or indirectly any proceeds of schedule of offence and/or is not designed for the purpose of any contravention or evasion of the provisions of the Prevention of Money Laundering Act, 2002 and any Rules, Regulations, Notifications, Guidelines or Directions thereunder, as amended from time to time. I/We shall provide any further information and fully co-operate in any investigation as and when required by the Corporation in accordance to the applicable Law. I/We further affirm that the information/details provided by me/us is/are true and correct in all respect and nothing has been concealed.

SIGNATURE OF DEPOSITOR(S)

FIRST/SOLE/
GUARDIAN : _____

SECOND : _____

THIRD : _____

FORM DA - 1 : NOMINATION (Must be signed by the depositor(s) & witnessed)

Nomination under Section 36B of the National Housing Bank Act 1987 and Rule 2(1) of the Banking Companies (Nomination) Rule 1985 in respect of HDFC deposits. I/We nominate the following person to whom in the event of my / our / minor's death the amount of this deposit may be returned by HDFC Ltd. and Nominees' name shall/shall not be printed on the Fixed Deposit receipt.

Name of Nominee											
Flat No. & Bldg. Name											
Road No. / Name											
City						Pin Code					
State						Tel./Mobile					

Relationship with Depositor (if any)	Age of nominee	Date of Birth of nominee (if minor)*

* As the nominee is a minor on this date, I/We appoint (Name, address & age) _____

_____ to receive the amount of the deposit on behalf of the nominee in the event of my / our / minor's death during the minority of the nominee.

* Leave out if nominee is not a minor. Where deposits are made in the name of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor.

Names and Addresses of witnesses for nomination only.
(Thumb impression(s) shall be attested by two witnesses)

1) _____ 2) _____

Place & Date _____ Place & Date _____

Signature of witness(es) _____ Signature of witness(es) _____

SIGNATURE OF DEPOSITOR(S) FOR NOMINATION

FIRST/SOLE/
GUARDIAN : _____

SECOND : _____

THIRD : _____