

ACCOUNT TRANSFER FORM

ACCOUNT TRANSPER FORM																																	
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To,	Branch Manager																											D	ate	:	/	/	
	HDFC Bank,																																
	Branch																																
Acc	count Number :											٦,	^ııe	et l	d (F	irc	et l	Hal	dar	٠,				_	_								
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Sirs	Sirs, Cust Id (Second Holder): Cust Id (Third Holder):														+																		
	e request you to											,	ous) L I	u (i	•••	ıu	110	iuc	''	•		Ш										
1	Close & Transfer our a	ahov	/e me	≏nti	one	d acc	COLL	nt ir	n the	na	me	/s n	f.																				
١.	1)																																
	2)																																
	3)																																
	from yourBranch in(City Name) to your																																
	Branch in(City Name).																																
	2. Kindly transfer the balance lying to the credit of my/our existing account to my/our new account.																																
3.	3. I/We understand that the same operating instructions will apply for my/our new savings account.																																
4.	4. I/We hereby surrender my/our unused cheque leavestothe bank.																																
	I/We confirm that I/We have destroyed the unused cheques.																																
5.	My/Our new Mailing A	ddr	ess*	is a	as fo	llows	s:																										
	Flat No. & Bldg. Name	• 🔲			Щ	Щ			Ш		Ļ	Щ			Ļ	L	L	Ļ	Щ				L		ļ	Ļ	Ļ			ļ		Ц	
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6.	* In case the new mailing address differs from address existing on our records please furnish valid address proof for the same. 6. My/Our new Cheque Book & other deliverables need to be-																																
	Held at the new branc	h]																											
	Mailed to my new mailing address																																
7.	Reasons for transfer of	_																															_
Ω	e-Age Banking Chan	nol	c (DI	026	o ti	-k +k	20 r	olo	van	t ho	V06	٠/																					
0.	My/Our existing ATM/I											?)																					
				1													1	_															
	First Holder							_					_ _					╛															
	Second Holder :			L			_	_	_ _	_	_ _		_ _					╛															
	Third Holder :																																
	Please link this to my/	our	new	aco	coun	t.																											
	I/We authorize the bank to transfer/link the following facilities on my/our above-mentioned account to my/our new savings account.																																
	MobileBanking*						E	BillF	ay*									Ins	sta A	Alert	*												
	* To register for new Mobilel	Bank	ing/Bil	IIPay	//Insta	Alert	faci	lity, p	oleas	e fill	ир а	new	e-A	ge	Bank	ing	ı Re	egist	ratio	n for	m.												
9.	Sweep In								S	upe	r S	ave	er																				
	I/We authorize the bank to transfer the Sweep in instructions and/or Super Saver limits as existing in my/our above mentioned savings account to my/our new savings account.																																
		//ou	r nev	N Sa	aving	js ac	CCO	unt.	_			_	1	7		_						1		1				_	_				
	Fixed Deposit Nos.		Щ				_ _	_ _	_		<u> </u>	L				_								<u> </u>		_	_	_ _	4				
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		L						<u>_</u> _	<u></u>		L	L			L	L					L	L	L	L									
10.	10. FD interest credit & maturity proceeds credits []																																
	I/We authorize the bar	nk to	o trar	nsfe	er the	e ins	struc	ction	ı or	cre	dit	of n	ny F	=ix	ed [Del	po	sit i	nte	rest	pro	се	eds	8	Fixe	ed D)ер	osit	m	atur	ity		
	proceeds from my/our Fixed Deposit Nos.	abo	ove r	ner	ilion	eu a □		unt	101	ny/C	ur I	iew	sa T	ιvir 	igs	aC(UO	urit.						1		1	1	_	\neg				
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11. Nomination Mandate / Power of Attorney														
I/We authorize the bank to transfer the Nomination instructions and/or Mandate/Power of attorney holder details as existing in														
my/our above mentioned savings account to my/our new savings account.														
12. Credit Card I/We authorize the bank to transfer my autopay facility towards my Credit Card no.* to my/our new account opened in														
13.	13. Standing instructions & debit authorization for locker charges []													
	I/We authorize the bank to transfer all standing instructions & debit authorization for locker charges as it exists on my/our above mentioned account to my/our new account.													
14.	Depository Account details (In case your existing account is used for making payments of DP charges)													
	Client ID No.	DP ID No.	Name of Account Holde	r(s)										
	I/We authorize the bank to debit all DP related charges for the above-mentioned DP accounts or any other DP accounts which is currently linked to the existing account from my/our new savings account. (In order to change the address on your Depository Accounts and/or change the existing dividend mandate on your accounts please contact your													
	nearest HDFC Bank branch.)													
15.	I/We authorize the bank to	ge for HDFC Securities Limited (transfer all debit authorization and mentioned account to my/our new	l linkage for the HSL Trading A	ccount No										
16.	16. Please Note: Kindlly tick the relevent box in case you have issued Post dated cheques from your existing savings account or you have provided your existing number for ECS debits / credits / dividend or remittance credits:													
	[] I/We undertake to replace the above PDCs immediately on receipt of my/our new savings account number & cheque book.													
	[] I/We undertake to make the necessary changes for the ECS debits / credits / dividend or remittance credits immediately on receipt of my/our new savings account number.													
Declaration: I/We have read and understood the Terms & Conditions governing the opening of an account with HDFC Bank and those relating to various services including but not limited to (A) ATMs, (B) PhoneBanking, (C) Debit Cards, (D) MobileBanking, (E) NetBanking, (F) BillPay facility. I/We accept and agree to be bound by the said Terms & Conditions including those excluding/limiting the Bank's liability. I/We understand that the Bank may, at its sole discretion, amend any of the services completely or partially with atleast 30 days notice and /or provide an option to switch to other sevices to me/us. I/We agree that the Bank may debit my/our account for the service charges applicable from time to time. I/We confirm that I/We am/are resident of India. I/We authorise the Bank to disclose, from time to time any information relating to my savings account to any parent/subsidiary, affiliate and associate of HDFC Bank, and to third parties engaged by the Bank, for purposes as detailed in the Terms & Conditions Booklet. I/We confirm that I/We am/are in possession of and have read the Terms and Conditions booklet which details the rules governing account operations, the Service charges and Fees Brochure which specifies the charges applicable from time to time for various captions. If No bayes understood that I/We am/are required to maintain the prescribed Average Quarterly Balapso in the account.														
from time to time for various services. I/We have understood that I/We am/are required to maintain the prescribed Average Quarterly Balance in the account. Note: The Bank will not be liable / responsible for the return/dishonoring of any cheques issued by me/us and presented to the bank post the transfer of my/our existing account. The Bank reserves the rights of recovery in case of any future debits accuring on this account as a result of any claims or transactions.														
* I/We consent/ do not consent to receive information / service etc for Marketing purposes through Telephone/Mobile/SMS/Email by the Bank/its agents. I/We confirm that I/We have read and understood the above Declaration, and that the details provided on the form are correct. I/We also confirm that my/our account been opened by Bank officer														
Mr./Ms & I/We have signed in his/her presence.														
* Mandatory Field														
Signature of First Account Holder Signature of Second Account Holder Signature of Third Account Holder														
Plac	ce :													
Date	e :													
BRANCH USE ONLY CPU USE ONLY														
Sig	nature of Account holder/s verifie		New Branch Code											
Doc	by (NAME)		New Branch Name											
			New Account No.											
PB	Signature	Date	INGW ACCOUNTING.											
			DVU											
API	PROVED BY (BM)		FCU											
-	URCING BR CODE													
NE	W BR CODE													