Date:
The Manager,
HDFC Bank Ltd.
_____Branch
_____

Dear Sir/Madam,

Sub: Customer ID No. _____

I request you to effect the following changes in your Bank records. I understand that the change(s) is / are being carried out at my/our request and will affect all accounts held by me with HDFC Bank under the captioned Customer ID. I / We submit the necessary documents (for Address Change requests and Name Change requests) in original and photocopy required for effecting the same.

☐ Change of Address

Present Address as per Bank records

_____
_____
_____

Pin Code: | | | | | | |

New Address

_____
_____
_____

Pin Code: | | | | | | |

Contact Details
Telephone Nos. Residence:_____Office:_____Mobile _____
Fax _____ Email ID _____
_____

☐ Change of Name Reason for Name Change_____

Present Name_____

New Name _____

☐ Change of Signature (To be signed in present of Bank staff)

Existing

New

☐ Change of Operating Instructions:
A/c Number(s) : 1. _____ 2. _____ 3. _____
(Please tick anyone of the following)

- Existing : ☐Singly ☐Either or Survivor ☐Jointly ☐Anyone or Survivor
- New : ☐Singly ☐Either or Survivor ☐Jointly ☐Anyone or Survivor

Following are the terms for change of request

- Changes requested above would be effected in the Bank's records by the Bank within a period of 4 to 5 working days from the date of receipt at the Branch and the said changes would be effective in the systems from that date only. Till such time, the Address Change request is effected in the Bank's records, any despatch/communication by the Bank which are still in transit would continue to be despatched to the old address
- The fresh / new Signature(s) and / or Operating Instructions would be valid once the changes are updated in the system. The Bank will not be responsible for return / dishonour of any such old outstanding / unpaid cheques / debits / requests and which are still in transit and yet to be received / actioned by the Bank and not in conformity with the fresh / new Signature(s) and / or Operating Instructions Change request.
- In case, where the Operating Instructions have been changed from Singly or Either or Survivor to Joint Operation, the ATM/Debit cards would be hotlisted / discontinued automatically
- I/ We have read, understood and are agreeable to the terms mentioned above.

Kindly do the needful at the earliest,

Yours faithfully,

_____
(To be signed as per the Operating Instructions for the Account held with the Bank)

FOR OFFICE USE ONLY
Branch Name:_____
Received on (Date) _____
Customer Signature Verified by(sign)_____
Name of the Staff _____ (Employee ID_____)
For CPU use only Updated by : Authorised by :
(Employee ID_____) (Employee ID_____)

Customer Acknowledgement Copy Dated_____

Branch_____Cust ID _____ A/c Number(s) _____

We acknowledge receipt of instructions(s) for (tick √)

☐ Change of Address ☐ Change of Name ☐ Change of Signature ☐ Change of Operating Instructions

The requested changes will be carried out in the Bank's records only for the Accounts mentioned above.

Bank Seal

Dated: Name of Bank Official : Signature of Bank's Official _____