Credit Cards
HDFC BANK
We understand your world

Balance Transfer Application Form

(Please use capital letters to fill the application)

Your HDFC Bank International Silver/Health Plus/eSeva Credit Card No □□□□□□□□□□□□□□□□

Your Name □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□

CREDIT CARD I

Issuing Bank……………………Card No…………………………Expiry Date……………….Amount to be transferred (Minimum amount Rs.5000/-)…………………………

Name as it appears on your existing card □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
(Please leave one box space between names and surname)

CREDIT CARD II

Issuing Bank……………………Card No…………………………Expiry Date……………….Amount to be transferred (Minimum amount Rs.5000/-)…………………………

Name as it appears on your existing card □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
(Please leave one box space between names and surname)

□ Yes, the copies of the latest 3 statements of other credit card(s) are enclosed. The copies of statements clearly show the following:

□ Credit Limit □ Total Amount Due

□ Minimum Amount Due □ Cash Advances

□ Yes, the Balance Transfer amount(s) is/are less than 50% of credit limit on the HDFC Bank International Silver/Health Plus/eSeva Credit Card. I have the available credit limit to□accommodate the transfer(s).
I wish to avail of the Balance Transfer facility on the following terms and conditions:

TERMS & CONDITIONS

1. Transfer Amount is subject to a minimum of Rs.5000 and maximum of 50% of the HDFC Bank International Silver/Health Plus/eSeva Credit Card credit limit, but shall not be in excess of the outstanding balance on the other card account.
2. Balance Transfer is not applicable from other card accounts that have an overdue status or where the credit limit has been exceeded.
3. Balance Transfer will not be accepted from other existing HDFC Bank Card accounts.
4. The Card member will continue to make payments to the other card issuer(s) until he receives a Cheque/DD/pay order from HDFC Bank favouring the other card issuer(s). HDFC Bank will not be liable for any new charges, overdue payments, interest charges, etc. on the said card account(s).
5. The preferential rate of interest on the transfer amount will be for a period of six months from the date of the Cheque/DD/pay order favouring the other card issuer or the date the amount is charged to the HDFC Bank International Silver/Health Plus/eSeva Credit Card account whichever is earlier.
6. HDFC Bank reserves the right to accept or reject any Balance Transfer request. The terms and conditions shall be deemed to be a part of The Card member Agreement and are incorporated therein by reference.
7. Balance Transfer request once approved and processed cannot be cancelled.

Please read the above mentioned terms and conditions before signing below.

Primary Card member's signature ……………………………………………………………………