

(Form - 1) Application for Sukanya Samriddhi Account



Bank Aisa Dost Jaisa

To,
Manager
IDBI Bank

_____ Branch

Sir,

I _____ (Applicant/ Guardian) hereby apply for opening of an account
Under Sukanya Samriddhi Account Scheme in your Bank.

I tender herewith ₹ _____ /- (₹ _____)

In cash/ Cheque/DD. No. _____ date _____ as initial deposit. My particulars are as under:

Paste
photograph of
applicant/s

1. Name of the Depositor : _____

Date of Birth _____ (DD/ MM/ YYYY)

2. Name of Guardian : _____

Husband/ Father / Mother's name: _____ Date of Birth _____ (DD/ MM/ YYYY)

3. Aadhaar Number of Guardian : _____

4. Permanent Account Number (PAN) of Guardian : _____

5. Present Address : _____ Permanent Address : _____

6. Contact details : Telephone Number _____ Mobile Number _____

E-mail ID : _____

7. Type of Account : Minor

8. (*) Details of Birth Certificate of the depositor : _____

Certificate No.: _____ Date of Issue: _____ Issuing authority: _____

9. Details of other KYC documents attached

1. Proof of identification: _____ 2. Address proof: _____

11. 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.

The operation of the account will be :

(a) By the Guardian till the depositor attains majority. (b) By the depositor herself on attaining majority.

(Select which is applicable)

12. Specimen Signatures

1 _____ 2 _____ 3 _____

Name _____ Name _____ 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.

Date: _____

Signature or thumb impression of guardian

Nomination

I _____ hereby nominate the person(s) mentioned below to whom to the exclusion of all other persons in the event of my death the amount standing to my credit in Sukanya Samriddhi Account No. _____ at the time of my death would be payable.

Sr. 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						

As the nominee(s) at Serial No.(s) _____ specified above is/ are minor(s), I appoint Shri/ Smt/ Kumari _____
_____ S/o, D/o, W/o _____

Address _____
_____ to receive the sum due under the said account in the event of my death during the minority of the nominee(s).

1. Signature of witness _____

2. Signature of witness _____

Name & Address _____

Name & Address _____

Place: _____

Date: _____

Signature or thumb impression of guardian

For Internal Bank Use Only

The account has been opened in the name of _____ on _____ with Initial deposit of ₹ _____ with Account No. _____ dated _____

Customer Identification Number _____

Nomination has been registered vide No. _____ dated _____

Date: _____

Signature and seal of competent authority/ Bank Official