FORM -1

Application for opening an account

10							
The P	ostmaster/Manager						
			Paste photograph of applicant/s				
Sir,							
	l (accoun	t halder/guerdien) hereby apply	for analysis of an account under Dublic				
Provid	ent Fund Scheme.	t noider/guardian) nereby apply	for opening of an account under Public				
 (Do	tender	herewith	Rs/- in cash/Cheque/DD.				
No	date as ini	tial deposit. My particulars are a) in cash/Cheque/DD. s under:-				
1.	Name of account holder						
	Husband/Father /mother's nam	 ne					
	Date of Birth						
		(DD / MM / Y	(DD / MM / YYYY)				
		(In words) OR					
2.	Name of minor account holder						
	Father /mother's name or the g	uardian					
	Date of Birth						
3.	Aadhar Number of account holder/guardian						
4.	Permanent Account Number (F	PAN) of account holder /guardia	n				
5.	Present Address						
	Permanent Address						
	1 omanone / tadroco						
6.	Contact details	Telephone Number Mobile Number					
		IVIODITE INUITIDEI					

7. Type of Ac	count	person of unsound mind or blind or differently abled through authorized person.		
	of date of birth proof in case of minor account)			
a)	Certificate No.			
b)	Date of Issue			
c)	Issuing authority			
(In case the	f Guardian (Natural/Legal) account is opened on behalf of on of unsound mind)			
10. Details of o	ther KYC documents attached	1. Proof of identification		
		2. Address proof		
containing 1. The operat	details of name and address ion of the account will be:- ccount holder on attaining majo	(a) By the Guardian till the account holder attains majority.		
	2	,		
	e that I have not opened a Pub number 1 in any of the Post off	olic Provident Fund Account in the name of the myself/minor fice/Bank in the country.		
	ors as per provision of paragra	of maximum deposit in the accounts opened in my name and ph 4 and any deposit in excess of the ceiling will be treated		
	e that I and the minor both are F e in our residency/citizenship st	Resident citizen of India and undertake to inform the account tatus in future.		
	e to abide by the scheme procheme and amendments issue	rovisions and Government Savings Promotion rules-2018 d thereto from time to time.		
		Signature or thumb impression of account holder /guardian		
ate:				

			Nomination	1		
exclusion		here ns in the event of my				
S.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						
the even 1. Signa Name & 2. Signa	nt of my death durin ature of witness Address	g the minority of the	nominee(s).	to receive the su	im due under	the said account i
Place: Date:			·	·	on of account	holder or guardia
			of Post Off			
deposit	e account has been ofRs	opened in the name	of with	Account No.	.on	with initia
		nber				
Nomina No	ition	has dated	been	r	egistered	vid
				Signature	and seal of co	ompetent authority