FORM - 1

[See sub-paragraph (1) of paragraph 3]

(Application for opening an account)

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To,							Paste photograph of		
	Th	e Postmaster/Ma	applicant/s						
	•••								
Sir,	•••	•••••							
511,	I (account holder/guardian) hereby apply for openin Public Provident Fund Scheme.						ng of an account under		
	I		tender		herewith		Rs		
						particulars are as un	in cash/Cheque/DD. nder:-		
	1.	Name of account holder							
		Husband/Father /mother's name							
		Date of Birth		MM / ``	YYYY)				
		(In words).							
	2.	OR Name of minor account holder							
		Father /mother's name or the guardian							
		Date of Birth							
		(DD / MM / YYYY) (In words)							
	3.	Aadhaar Numbe	adhaar Number of account holder/guardian						
	4.	4. Permanent Account Number (PAN) of account holder/guardian							
		Present Address							
		D (A11							
		Permanent Addr	ress						
		Contact details				ber			
					Mobile Number				
	7.	Type of Accoun	t		Single or through Guardian for Minor or				
		-				nd mind or blind or			
					abled through au		-		

8.		date of birth pro					
		case of minor a					
	d)	Certificate No					
	e)	Date of Issue					
	f)	Issuing author	ity				
9.	(*) Name of	Guardian (Natura					
	(In case the ac	count is opened		/inor/person of unsou			
10.	Details of oth	er KYC docume	nts attached	1. Proof of identified	cation		
				2. Address proof			
	(The following address processing the second		re accepted as	valid documents for t	he purpose of identification and		
	1. Passport 2	Driving license officer 5. Letter	issued by the N		by NREGA signed by the State gister containing details of name		
11.	The operation of the account will be:- majority.			(a) By the Guardian till the account holder attains(b) By the account holder on attaining majority,			
12.	Specimen Sig	gnatures					
1			2		3		
(Nai	me)		Name		Name		

I hereby declare that I have not opened a Public Provident Fund Account in the name of myself/minor mentioned at serial number 1 in any of the Post office/Bank in the country.

I further declare that I will abide by the ceiling of maximum deposit in the accounts opened in my name and in the name of minors as per provision of paragraph 4 and any deposit in excess of the ceiling will be treated as in contravention to the Scheme.

I further declare that I and the minor 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.

Signature or thumb impression of account holder /guardian

Date:....

Nomination

13. I hereby nominate the person(s) mentioned below to whom to the exclusion of all the persons in the event of my death the amount standing to my credit at the time of my death would be payable.

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						

As the nominee(s) at Serial No.(s) /Smt/Kumari	specified above is/are minor(s), I appoint Shri
	Iress
	to the event of my death during the minority of the
Signature of witness	
Name & Address	
Signature of witness	
Name & Address	
Signa	ature or thumb impression of account holder or guardian
Place:	
Date:	
F	For use of Post Office/Bank
The account has been opened in the name of	on
with initial deposit of Rs	with Account No dated
Customer identification Number	
Nomination has been registered vide No	

dated.....

Signature and seal of competent authority