FORM -1

	•	ment Savings Promotion Rules, 2018) account under National Savings Schemes.
То	The Postmaster/Manager	
		Paste photograph of applicant/s
0:-		
Sir,		
acco		pplicant/guardian) hereby apply for opening of an (Name of the scheme in your
Pos I/We (Rs.	st Office/Bank. /e tender	herewith Rs/-
No.	date as	nitial deposit. My/our particulars are as under:-
	1. Name of First Depositor	
	Husband/Father /mother's na	ne or Guardian appointed by Court
	Date of Birth	
		(DD / MM / YYYY) (In words)
	Husband/Father /mother's na	
		(In words)
	3. Name of Third Depositor	
	Husband/Father /mother's na	ne
	Date of Birth	
		(DD / MM / YYYY) (In words)
	4. Name of Fourth Depositor	
	Husband/Father /mother's na	ne
	Date of Birth	

		(DD / MM / YYYY) (In words)
5. Aadhar Num	ber	
	Account Number (PAN)	
7. Present Add	ress	
		······
Permanent A	ddress	
8. Contact deta	ils	Telephone
Number		Mobile Number Email ID
9. Type of Acco Minor or	punt	Single or Joint or through Guardian for person of unsound mind or blind or differently abled through authorized person.
10. (*)Details of	Birth Certificate	
	case of minor account Samriddhi A/c)	
a)	Certificate No.	
b)	Date of Issue	
C)	Issuing authority	
11. (*) Name of (Guardian (Natural/Legal)	
	account is opened on behalf o of unsound mind)	fa

12. (*) Aadhaar number of parent/guardian	
(Copy may be enclosed) (b) Permanent Account Number (PAN)	
(*) Applicable in case of Minor accounts	
13. Details of other KYC documents attached	1. Proof of identification
	2. Address proof

(The following documents are accepted as officially valid documents for the purpose of identification and address proof: 1. Passport 2. Driving license 3. Voter's ID card 4. PAN card 5. Aadhar card 6. Job card issued by NREGA signed by the State Government officer.)

14. The operation of the account will be:together or the surviving holder/s. (In case of joint account) the surviving depositor/s,
(a) By all the holders (b) By either of the holder/s, or

15. My/our specimen Signatures

1 (Name)	2	
1 2		.3 (Name)
1 3	(Name)	2
1 3	(Name)	2

I hereby undertake to abide by the scheme provisions and Government Savings Promotion rules-2018 applicable on National Savings Schemes and amendments issued thereto from time to time.

Signature or thumb impression of applicant/guardian

Date:....

16. I hereby declare details of my existing accounts as on today under different National Savings Schemes in any of the Post office/Bank in the country.

	S.No.	Name of	Date of	Amount	Customer	Account	Name of Post
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	Scheme	opening of account	deposited	Identification Number	number	office/Bank
1.	Public Provident Fund (PPF)			Number		
2.	Sukanya Samriddhi Account (SSA)					
3.	National Savings Monthly Income Account (MIS)					
4.	Senior Citizen Savings Scheme (SCSS)					

Nomination

17. I/we.....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(Name of Scheme) 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	Date of birth of nominee in case of	Share of entitlement	Nature of entitlement Trustee or
				minor		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.....

Name & Address.....

2. Signature of witness.....

Name & Address.....

Signature or thumb impression of applicant or guardian

Place: Date:

For use of Post Office/Bank

-	v	vith	initial	name ofdeposit	of
the dated	scheme)		Account	No Customer	
Nominatio		has	been dated	registered	vide

Signature and seal of competent authority.