

SIGNATORY DETAILS

Please attach a separate mandate sheet, for more than 4 signatories

Authorised signatory (1)

Name

Limits

Singly ₹ /unlimited

Jointly ₹ /unlimited

With Mr./Ms.

Authorised signatory (2)

Name

Limits

Singly ₹ /unlimited

Jointly ₹ /unlimited

With Mr./Ms.

Authorised signatory (3)

Name

Limits

Singly ₹ /unlimited

Jointly ₹ /unlimited

With Mr./Ms.

Authorised signatory (4)

Name

Limits

Singly ₹ /unlimited

Jointly ₹ /unlimited

With Mr./Ms.

Authority restrictions, if any:

the authorised signatories will sign cheques, bill of exchange, promissory notes, requests/agreement forms for letters of credit and amendments thereto, request/counter indemnities for guaranties and extensions thereto, foreign exchange contracts and requests for purchase of cheques/bills etc. singly/jointly as indicated above.

I/we hereby certify that the above authorities have been given in terms of our board resolution dated a copy of which is attached.

Name of chairman/director/ authorised signatory

signature

COMPANY SEAL AND STAMP

PHOTOGRAPHS & SIGNATURE

1st applicant	2nd applicant	3rd applicant	4th applicant
Signature	Signature	Signature	Signature

(applicants should also sign across photographs)

DECLARATION

I/We have read and understood the IDBI Bank account terms and conditions, a copy of which, I am in possession of. I/We accept and agree to be bound by the said terms and conditions including those excluding/limiting your liability. I/We agree that the bank may debit my/our account for service charges as applicable from time to time.

Please fill in for a HUF

As our HUF firm wishes to open an account with your bank in the said name _____ we beg to say that the first signatory to this letter, i.e. _____ is the karta of the joint family and other signatories are the adult co-parceners of the said family.

We further confirm that the business of the said family is carried on mainly by the said karta as also the other signatories hereto in the interest and for the benefit of the entire body of co-parceners of the joint family. We all undertake that the claims due to the bank from the said family shall be recoverable personally from all or any one of us and also from the entire family properties of which the first signatory is the karta, including the share of minor co-parceners. In view of the fact that ours is not a firm governed by the Indian Partnership Act of 1952, we have not got our said firm registered under the same act. We hereby undertake to inform the bank of the death or birth of a co-parcener or any change occurring at anytime in the membership of our joint family during the currency of the account.

Name & signature of karta _____	signatory		date of birth signature
Name & signature of adult co-parceners _____			
Name & dates of birth of minor co-parceners _____			

Please fill in for a partnership firm

re: opening of a new account in the name of _____
We refer to the captioned account opened by you and declare as under:

We, the undersigned, are the only partners in the firm and are jointly responsible for liabilities thereof. We shall advise you, in writing, of any change that takes place in the partnership and, all the partners will be liable to you on any obligation which maybe standing in the firm's name in your books on the date of the receipt of such notice and until all such obligations shall have been liquidated.

yours faithfully

Name of partners

Signature(s) without stamp

IDBI BANK INTERNATIONAL DEBIT CUM ATM CARD

(for international debit cum atm card for partnership and HUF also attach the indemnity letter)

Primary Card

1st Applicant _____
(Name to be Embossed on the card)

2nd Applicant _____
(Name to be Embossed on the card)

3rd Applicant _____
(Name to be Embossed on the card)

Please Note:

- This facility is not available if the operating instructions are Jointly by all.
- Whenever you make a purchase at a Merchant Establishment or make a Cash Withdrawal at another bank's ATM the Primary Account (as specified by you) will be accessed.

Branch Managers Comments _____

Date _____ Signature of Branch Manager _____

DECLARATION

I/We authorize IDBI Bank to issue an IDBI Bank Debit cum ATM Card to me/us. I/We acknowledge that the issue and usage of the card is governed by the terms and conditions as in from from time to time and agree to be bound by the same. I/We accept that the terms and conditions are liable to be amended by IDBI Bank from time to time. I/We further unconditionally and irrevocably authorize IDBI Bank to debit my/our account with an amount equivalent to the annual fee and charges for use of the Debit cum ATM. I/We hereby confirm that this account will be operated singly and in case of JointAccounts the operating instructions will not be jointly by all.

I/We undertake to strictly utilize the card in accordance with the Exchange Control Regulations as laid down by Reserve Bank of India from time to time. I/We conform that the foreign exchange which will be used will be within the limits of the Business Travel Quota as per Foreign Exchange Management Act 1999. I/We will adhere to guidelines, which are issued by the Reserve Bank of India concerning the use of the foreign exchange. I/We have read and understood the Terms and Conditions (a copy of which I am in possession of governing the opening of an account with IDBI Bank Limited and those relating to various services including but not limited to Debit cum ATM Cards/Phone Banking/Mobile Banking/Internet banking. I accept and agree to be bound by the said Terms and Conditions including those excluding/limiting the Bank's liability. I/We understand that the Bank may, at its absolute discretion, discontinue any of the services completely or partially without any notice to me/us. I agree that the bank may debit my account for service charges as applicable from time to time. I/We confirm that I/We am/are Residents of India. I/We hereby declare that the information furnished above is true and correct and to the best of my/our knowledge.

(Authorised Signatory)

(Signature of the partner)

FOR BANK USE

cust id _____	cust id _____	cust id _____	
scheme code _____	source code _____	authorised signatory (for bank) _____	date _____

FORM NO.: 60
(see third proviso of rule 114 B)

Form of declaration to be filled by a person who does not have either a PAN or GIR number and who makes payment in cash in respect of transactions specified in clauses (a) to (h) of rule 114B.

1. Full name and address of the declarant : _____

2. Particulars of transaction : _____

3. Amount of transaction : _____

4. Are you assessed to tax ? Yes / No

5. If yes,

(i) Details of Ward / circle / range where the last return of income was filed ? _____

(ii) Reasons for not having PAN / GIR ? _____

6. Details of the document being produced in support of address in col.1

Verification

I, _____ do hereby declare that what is stated above is true to the best of my knowledge and belief.

Verified today, the _____ day of _____

Date : _____

Place : _____

Signature of the declarant

Instructions :

Documents which can be produced in support of the address are :-

Ration card, Passport, Driving Licence, Identity card issued by any institution, Copy of the Electricity Bill / Telephone bill showing residential address, Any document or communication issued by any authority of Central / State Government / Local bodies showing residential address, Any other documentary evidence in support of his address in the declaration.

FORM NO.: 60
(see third proviso of rule 114 B)

Form of declaration to be filled by a person who does not have either a PAN or GIR number and who makes payment in cash in respect of transactions specified in clauses (a) to (h) of rule 114B.

1. Full name and address of the declarant : _____

2. Particulars of transaction : _____

3. Amount of transaction : _____

4. Are you assessed to tax ? Yes / No

5. If yes,

(i) Details of Ward / circle / range where the last return of income was filed ? _____

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I, _____ do hereby declare that what is stated above is true to the best of my knowledge and belief.

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