**CUSTOMER REQUEST FORM**

<table>
<thead>
<tr>
<th><strong>Branch Name</strong></th>
<th></th>
<th><strong>Branch Code</strong></th>
<th></th>
<th><strong>Date</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1st Applicant's Name</strong>:</td>
<td></td>
<td><strong>2nd Applicant's Name</strong>:</td>
<td></td>
<td><strong>Account Number</strong>:</td>
<td></td>
</tr>
</tbody>
</table>

**A/c Type:**
- [ ] SB
- [ ] CA
- [ ] TD
- [ ] RD
- [ ] LN

*(Fields marked* are mandatory)*

*Kindly fill only those boxes where information is to be added or updated. On submission of form always ask for acknowledgement*

(Kindly tick the boxes against the request opted for)

### ADD/UPDATE PERSONAL DETAILS

1. **Update KYC ID Type:**
   - [ ] PAN
   - [ ] Aadhar
   - [ ] Driving License
   - [ ] Passport
   - [ ] Voter ID
   - [ ] NREGA Card

**Document number**: 

*(Attach self-attested copy of document for verification with original)*

**Place of Issue**: 

**Issue Date**:  

**Valid till date**:  

2. **Address Change**:
   - [ ] Permanent
   - [ ] Correspondence
   - [ ] Both (Please leave space between two words/digits)

**Address**:  

**City/Village**:  

**District**:  

**Sub-District**:  

**State**:  

**Country Name**:  

**Zip/Post Code**:  

**ISO 3166**

**Country Code**:  

### OTHER ACCOUNT/CIF MODIFICATIONS

11. **Transfer**
   - [ ] Account
   - [ ] CIF
   - [ ] Both To
   - [ ] Branch Name
   - [ ] Branch Code:  

12. **Change mode of operation in above mentioned account to:**

   - [ ] Self
   - [ ] Either or Survivor
   - [ ] Former or Survivor
   - [ ] Later or Survivor
   - [ ] Jointly
   - [ ] As per mandate

13. **Reason for activation of inoperative/Dormant account (number mentioned above):**

14. **Convert my account from Minor to Major as I became Major on:**

15. **Change A/c Type to:**
   - [ ] Salary Package Variant:  
   - [ ] Corporate/Defence/Salary/Savings Bank to NRO Savings Bank
   - [ ] Current Account Variant: Regular/Diamond
16. Change my signature in above mentioned account:

From | OLD SIGNATURE | To | NEW SIGNATURE

17. If we request to close above account and pay the balance by: Cash/ Credit to account no.

18. Please change the tenure of my/our Fixed deposit A/c No. to

19. Reissue Term Deposit advice for A/C number:

20. Please issue TDS/Interest certificate for Account Number/s:

21. Passbook required: Yes / No (If No, Request for statement of account through e-mail id.

22. Request to Issue Duplicate Passbook for the Account Number:

23. Request to activate Phone Banking/Mobile Banking services in the above-mentioned account.

24. Standing instruction: Please transfer Rs. to RD/Loan/SB A/c No. Starting from date: Daily/Monthly/End of Month

25. Setup Auto-sweep facility - Saving Plus Threshold amount: Rs. Sweep time: Daily/Weekly/Monthly/Bi-Monthly/Quarterly/Half yearly/Yearly/Fortnightly. Under reverse sweep facility the MOD (Multi-option deposit) to be broken by: Last in First Out/First in Last Out

26. Nomination to be modified in my account mentioned above: New/Change/Delete

(Please fill and attach DA-1 form for new nomination, DA-2 form to delete nomination and DA-3 form to change nomination)

27. Nomination to be modified: [Add/Modify] in the scheme APY/PMJJY/PMSBY/PPF

28. Request to update the pension amount for APY from Rs. to 1000/2000/3000/4000/5000

I hereby authorize the bank to debit my above mentioned bank account till the age of 60 for making payment under APY as applicable based on my age and the Pension Amounts elected by me.

29. Cheque book facility: Please provide cheque book facility in my account number mentioned above.

30. New personalized cheque book request: Number of leaflets: 10/20/25/50/100

Name on cheque:

Address to be delivered to: Permanent/Correspondence/New

31. Request to stop (number of cheques) Cheque number listed below/attached

Starting from ending at: or Cheque number:

Cheque number: Cheque number:

Cheque number: Cheque number:

32. ATM card issuance (Charges will be deducted as applicable): New/Replace*

Address to be delivered to: Permanent/Correspondence
Request for New Card: [] Personalized Card [] Non Personalized Card, Type of Card: Rupay / VISA

Name on card: ____________________________________________________________

* Reason for replacement – Card lost/Damage/Card Expired

33. Block / Unblock debit card number: ____________________________________________

INTERNET BANKING SERVICES

34. Activate Internet banking in the above mentioned account.

Reference Number (for official use only):

35. Request to: Reactivate the username/Re-issue login password/Reset the INB profile password Date of Birth: ___________

36. Internet Banking rights modification: Full Transaction rights/Limited Transaction rights

PENSION SERVICES

37. I wish to submit Life Certificate for PPO no: __________________________

38. Please issue Pension Certificate/Slip for PPO no: __________________________ for the Month ________ Year ________

39. Please issue Form 16 for PPO no: __________________________

40. Pensioners Grievances (Pension not credited/Life Certificate not updated)

LOCKER SERVICES

41. Request for Allotment of Locker: (Size): Small [] Medium [] Large []

(Duly filled in nomination form is to be attached)

42. Request to add Nomination to Locker number: __________________________

43. Request for Locker Conversion from Single to Joint: Locker No.

Name of Joint Holder: ________________________________________________________

Account no. of Joint Holder: __________________________

44. Request for closure (Surrender) of Locker No: __________________________ Bearing Key No: __________________________

45. Request for break open of Locker No: __________________________

ADDITION/DELETION OF A/C HOLDERS

Add / Delete: __________________________ Existing: Yes [] No [] (if Yes) A/c No. __________________________

Relation with A/c holder: ______________________________________________________

Revised Mode of Operation:

[] Self [] Either or Survivor [] Former or Survivor [] Later or Survivor [] Jointly [] As per mandate

I have read, understood and agree to the Terms and Conditions of various products and services including SMS alerts, Debit card and Internet Banking. I accept and agree to be bounded by the Terms and Conditions as displayed on https://www.bankofmaharashtra.in. I agree that the bank may debit service charges plus taxes to my account whenever applicable. I wish to seed this account with NPCI mapper to enable me to receive Direct Benefit Transfer (DBT) including LPG Subsidy from Govt of India (GOI) in this account.

Kindly provide the number of Requests submitted (count and enter number of ticks in the checkboxes):

First account holder's signature __________________________

Second account holder's signature __________________________

Signature of Branch Official with SS No. __________________________

ACKNOWLEDGEMENT

Date of Request Received: __________________________ Customer Name: __________________________

Employee Number: __________________________ Name of Branch Official: __________________________ Signature: __________________________

Please note: Your request will be processed within 2 working days. Delivery of kits/checkbook etc. to your address will take between 7-15 working days (depending on delivery location)