FORM -1

Application for opening an account

10	
The Postmaster/Manager	
	Paste photograph of
	applicant/s
Sir,	
I(account holder/guardian) hereby apply for opening under Public Provident Fund Scheme. I tender herewith Rs) in cash/Cheque/DD. No	/(Rs In words
date as initial deposit. My particulars are as under:-	
Name of account holder	
Husband/Father/mother's name	
Date of Birth(DD / MM / YYYY) (In words)	
OR	
Name of minor account holder Father /mother's name or the guardian Date of Birth(DD / MM / YYY (In words)	
3. Aadhar Number of account holder/guardian	
4. Permanent Account Number (PAN) of account holder /guardian.	
5. Present Address	
Down an aut Address	
Permanent Address	
6. Contact details	
Telephone Number	
Mobile Number	
Email ID	

7. Type of Account
Single or through Guardian for Minor or person of unsound mind or blind or differently abled through authorized person.
8. (*)Details of date of birth proof
a) Certificate No
b) Date of Issue
c) Issuing authority
9. (*) Name of Guardian (Natural/Legal)(In case the account is opened on behalf of a Minor/person of unsound mind)
10. Details of other KYC documents attached 1. Proof of identification
2. Address proof
11. (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. Job card issued by NREGA signed by the State Government officer 5. Letter issued by the National Population Register containing details of name and address);
 The operation of the account will be:- (a) By the Guardian till the account holder attains majority. (b) By the account holder on attaining majority,
12. Specimen Signatures
1 2 3.,
(Name)
I hereby declare that I have not opened a Public Provident Fund Account in the name of the 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. l			hereby no	minate the pe	erson(s) ment	ioned below		
to whom to the exclusion of all other persons in the event of my death the amount standing to my credit at the time of my death would be payable.								
to my t	redit at the time	or my death wou	id be payable).				
S.No.	Name(s) of	Full address	Aadhaar	Date of	Share of	Nature of		
	the nominee(s)	(s)	number of nominee	birth of nominee in	entitlement	entitlement Trustee or		
	and		(optional)	case of		owner		
	relationship		, ,	minor				
1								
2								
3								
4								
As the nominee(s) at Serial No.(s)								
Signature or thumb impression of account holder or guardian								
Place: Date:								
For use of Post Office/Bank								
on	count has been on the count has been on the count has been on the country when the country we have a country with the country was a c	vith initial deposit	of Rs					
Custor	ner identification	Number		Nomin	ation has bee	n registered		

Signature and seal of competent authority.