

Application No.

## Account Opening Form

### Point 1.

Membership No.

Mobile No.

Account No.

[illegible]

Please open an account as per details given below with an initial deposit of Rs..... In words  
(Rs.....)

## Point 2

## Member Details

Mr./Mrs./Miss (A).....  
 Father's/Husband Name.....\*Address (Doorstep solution)  
 of Member.....  
 .....Dist.....Pin Code .....  
 State..... Male/Female ( )

PHOTO  
A

PAN 

--	--	--	--	--	--	--	--

 Mobile No. 

.							
---	--	--	--	--	--	--	--

 DOB 

D	D	M	M	Y	Y	Y	Y
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## Applicant Details

Mr./Mrs./Miss (A).....  
 Father's/Husband Name.....\*Address (Doorstep solution)  
 of Member.....  
 .....Dist.....Pin Code .....  
 State..... Male/Female ( )

PHOTO  
B

PAN 



 Mobile No. 



 DOB

Please fill up Form 60/61 in case of non-availability of PAN

Point 3.	<u>Additional Details (wherever application)</u>

**Income:** ☐ Monthly ☐ Annually **Assets (approximate value): Rs** \_\_\_\_\_

**\*Religion:** ☐ Hindu ☐ Muslim ☐ Christian ☐ Sikh ☐ Others \_\_\_\_\_

**\*Category:** ☐ General ☐ OBC ☐ SC ☐ ST

**Education Certification:** ☐ Non-Graduate ☐ Graduate ☐ Post Graduate ☐ Others \_\_\_\_\_

**Occupation Type:** ☐ Salaried ☐ Self-employed ☐ Business ☐ Retired ☐ Student ☐ Others \_\_\_\_\_

Organization Name: \_\_\_\_\_ \*Designation/Profession: \_\_\_\_\_

[illegible][illegible]

**Vehicle:** ☐ Car ☐ Two-wheeler ☐ Other

**Life Insurance Value:** ☐ Upto 2 lakhs ☐ Upto 5 lakhs ☐ above 5 lakhs

**Life Insurance:** \_\_\_\_\_

**Existing Loans:** ☐ Car Loan ☐ Home Loan ☐ Personal Loan ☐ Education Loan ☐ Business/Agriculture

**House:** ☐ Ancestral ☐ Owned ☐ Rented ☐ Employers

**Mutual Fund:** ☐ SBMF ☐ Other ☐ No investment

**Credit Card:**

Signature:



Point 4.

### Particulars of Introduction/Identification

Name and Address of Introducer.....

Introducer's A/c No

--	--	--	--	--	--	--	--	--	--

Date

D	D	M	M	Y	Y	Y	Y
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I Certify that I have known Mr./Mrs./Miss..... For the last .....Monthly/years and confirm that his/her/their Name, Business and Address mentioned in the application form are correct.

Signature of introducer/Advisor & ID

Verifying Officer

### NOMINATION FORM

(To be obtained in case of all deposit accounts in the name of individuals in Single/Joint names)

I/We..... here by appoint the following person as nominee in respect of deposit A/c.

Nature and No. of A/c	Nominee's Name	Relation with Applicant	Age	If nominee's is minor, his/her date of birth

\*As the nominee is a minor on this date, I/We appoint Mr./Mrs./Miss/Dr.....

Age..... Resident of ..... as his/her guardian.

Signature(s)/Thumb Impression(s) of Depositor(s)

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**Witness**

Name

Name :

Place

Place :

Date

Date :

Point 5.

### Mode of Operation

<input type="checkbox"/> Self Only	<input type="checkbox"/> Jointly	<input type="checkbox"/> Either or Survivor	<input type="checkbox"/> Any Other.....
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### DECLARATION BY THE DEPOSITOR

I/We ..... are opening an account under ..... Scheme, the rules related to which/we have read & understood and accept the rules of the scheme and agree to abide by any future amendments/changes in the scheme.

Sincerely

Sign.....

Vernacular Declaration :

I ..... S/o, W/o, D/o, Mr. .... R/o .....

Declare that I have read out and explained in local language the rules, terms & conditions of scheme to the depositor Mr./

Mrs./Miss..... S/o, D/o, W/o, Mr. ....

Signature declaring

Point 6.

### VERIFICATION

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

Verify today, the ..... day of .....20.....

(Date).....

(Place).....

(Signature of the declaring)

Note: 1. compulsorily fill up the fields marked with asterix. 2. Applicant needs to affix his/her latest photograph. 3. Attach self-attested photocopies of KYC documents, such as, address proof, identity proof and PAN card compulsory.



To be filled by those applicants who do not have PAN Card.

FORM NO.61

Form of declaration to be field by a person who does not have  
Either a Permanent Account Number or General Index Register  
Number and who makes payment in cash in respect of  
Transaction specified in clauses (a) to (h) of the rule 114 B.

1. Full Name and address of the declarant.

.....  
.....  
.....

2. Particulars of transaction

.....  
.....

3. Amount of the transaction.

.....  
.....

4.Are you assessee to tax? (Yes/No)

5. If Yes

(1). Details of word/circle/range where the last Return of  
Income classified?

(2). Reasons or not having Permanent Account Number/  
General Index Register Number?

6. Details of the document being product in support of  
Address in column (1).

(Date).....

(Place).....

Form of declaration to be field by a person who has agriculture  
Income tax in respect of transaction specified in clauses (A) to (H)  
of rules 114B.

1. Full Name and address of the declaration.

.....  
.....  
.....

2. Particular of transaction.

.....  
.....

3. Details of the document being produced in support of  
Address in column (1).

.....  
.....

I hereby declare that my source of Income is form agriculture  
and I am not required to pay Income tax on any other Income  
If any.

#### Point No. 7

Company Details & Information:

Company Name: HBF NIDHI LIMITED, Date of incorporation: MAR 7 2017, CIN: U65900UP2017PLC091080

Registered Address: C 16 sector 6 Noida U.P 201301 INDIA, (we operate only from the mentioned branch address),

Paid Up Capital: Rs. 1 crore, Authorized Capital:

#### Point No. 8

I..... Request you to make me a part of HBF NIDHI LIMITED family,  
I fully understood and agree to provide all documents and conditions related the schemes.

Signature

For office use

Officer Name:

Relation with applicant:

Emp Id:

Sign:

Branch Manager:

Sign:

(Note : Branch manager signature is mandatory for visit verification if member is relative with employee/officer )

**Note: Compulsory fill up the fields marked with asterix.**

#### ACKNOWLEDGEMENT:

Mr./Ms./Mrs./Dr./Prof

Amount Rs.

Date

D	D	M	M	Y	Y	Y	Y

Signature & ID of HBF NIDHI Official



## Application for Membership

Branch..... Code.....

To,

The Director, HBF NIDHI LTD. Respected Sir I, shri/Smt/Miss.....  
opt to be Member in "HBF NIDHI LTD" and my detailed particulars are as follows.

PHOTO  
SIGNATURE

### PERSONAL INFORMATION

Name of Member.....

Father/ Husband Name.....

Present Address.....

City..... State..... Pin Code.....

Permanent Address.....

City..... State..... Pin Code.....

Date of Birth:       Age:   Sex: Male ☐ Female ☐

PAN NO.           Mob No.           Nationality.....

E-mail ID.....

Details of ID Proof: (PASSPORT/PANCARD/ADHAR CARD/OTHER) .....

Payment Mode cash ( ) Cheque/DD ( ) Online ( ) other ( ) .....

Amount 100/- only ( ) Cheque/DD/Transaction No. : .....

Account Details for emergency Deposit: (Its my savings account. please transfer my funds only with this account without my written permission)

Banker's Name: ..... Branch: .....

A/C No. .... IFSC Code..... Edu/Qualification.....

Present Occupation..... Nominee ☐ Same as above

Introduced by: (Name & Address of the Introducer) .....

Signature of Introducer..... Employee Card No.....

### DECLARATION

I hereby declare that I voluntarily opted for a member HBF NIDHI LTD. And a shall abide by the existing rules and Regulations of the Amendment as may be taken place from time to time.

Place..... Date..... Signature of the Member

### MEMBERSHIP CONDITIONS

- A person is to enroll only once for membership. A membership fee is Rs. 100/-A person has to affix his passport size photograph along with identify proof in the application form which are mandatory. The lunatics are also not eligible for membership in the company. Loan only granted to the member on their deposits.

### FOR OFFICE USE ONLY

I ..... Designation..... Employee code..... Of branch as verified all

the particulars of the membership Application of Sir/Smt/Miss..... And received Rs. ....

Vide Receipt No..... Date..... towards the membership fee.

Signature of Cashier/Office Assistant

Thank you for being a part of HBF NIDHI LIMITED Family member. You can contact for any kind of information & support ..

Regd. Office: HBF NIDHI LTD.  
C-16, Sec-6, Noida, UP (India) 201301, Contact: 0120-4752255  
Email: [Info@hbfnidhi.com](mailto:Info@hbfnidhi.com) Website: [www.hbfnidhi.com](http://www.hbfnidhi.com)

Officer Name :  
Emp ID :  
Contact Number: