## FEDERAL CAPITAL

**ACCOUNT OPENING APPLICATION FORM** 

BRANCH NAME: Chennai T Nagar Branch					Date (DD/MM/YYYY): 11/04/2025					
of their knowledge. T	The applicant iance with ap	t authorizes	Federal Ca	apital t	o ver	rify any info	orma	ation provid	ed and to	ete, and accurate to the best obtain further information from n or termination of any
TYPE OF ACCOUNT		☐ Savings A/c					✓ Current A/c			
		☐ Terms Deposit A/c				☐ Other A/c				
APPLICANT D	ETAILS:									
PAN NUMBER		POLLQ6882L								
FULL NAME		ANITA SURYANARAYANAN								
FATHER NAME		SHIVA SRINIVASAN								Applicant passport
GENDER			MALE		✓ FEMAL		E	☐ OTHER		photograph
DATE OF BIRTH (dd/mm/yyyy)		24/09/1987								
MARITAL STATUS		☐ SINGLE						MARRIED		☐ DIVORCED
Mobile Number		9476617630		EMAIL Add		dress anita.su		anita.sury	ryanarayanan@example.com	
RESIDENTIAL	ADDRE	SS:		•						
45/3, Lodhi R	oad, Nev	w Delhi	110003							
DOCUMENTS	ATTACH	ED:								
☑ PAN C	✓ Applicant selfie				photograph					
APPLICANT S	IGNATU	RE								
Aluston										

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<sup>\*\*</sup> Terms and Conditions governing < iBanking >> Services are available on bank's site https://www.federalcapital.co.in# Availing SMS Alert
Service with Internet Banking is mandatory. Therefore Providing Email Id and Mobile Number is essential to avail NetBanking ServicesOBC does not
own any responsibility for non delivery of SMS Alerts messages on account of Network congestions/ availing DND Services/ Ban by
StateGovernments/ feeding of wrong Mobile number/ System failures or any reasons beyond its control.#

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