

ACCOUNT TRANSFER FORM FOR CURRENT/SAVING ACCOUNT

(Please fill in the form in BLOCK LETTERS only, * marked fields are mandatory and tick where applicable) Date: D D M M Y Y Y Y			
*I / We hereby request to transfer my/our below mentioned account from			
Branch (Existing Branch Name) to Branch (New Branch Name)			
A/c Number*:	Custom	ner ID*:	
New Branch Code*:			
Account Title*:			
Reason For Transfer Of Account:			
Important Note / Declaration / Signature			
 Your existing live Net Banking and Phone Banking password will be valid for your account and your rights will be replicated in the Account as well. Your Old Cheque book contains IFSC code which will be changed post transfer of account. We request you to indent new chequebook for updated IFSC code. However, you can use the existing Cheque book available with you. Standing Instructions, Debit Instructions for Locker Charges and Sweep out Instructions if linked to the Current/ Saving Account would be transferred 			
 Automatically. Request would be rejected if REKYC of the Current/Savings Account is due. For Branch Transfer from Rural / Semi Urban to Urban / Metro area and Vice versa, Average Monthly / Quarterly Balance would be affected as per the new location Branch 			
I/we have read & understood the Terms & Conditions (a copy of which I am in possession of) related to the transfer of an account with HDFC Bank & those relating to various services including but not limited to (a) ATMs (b) Phone Banking (c) Debit Card (d) Mobile Banking (e) Net Banking (f) Bill Pay facility (g) Insta Alert Facility (h) Email Statements. I accept & agree to be bound by the said Terms & Conditions including those excluding/limiting the Bank's liabilities. 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/We agree that the Bank may debit my/our account for service charges as applicable from time to time. I/We have understood that I/We am/are required to maintain the prescribed Average Quarterly/Monthly Balance in the account. The Bank will not be liable / responsible for the return/dishonouring of any cheques / ECS issued by me/us and presented to the Bank post the transfer of my/our existing account. The Bank reserves the rights of recovery in case of any future debits accruing on this account as a result of any claims or transactions. I/We confirm that I/We have read and understood the above declaration, and that the details provided on the form are correct.			
Signature*:			
1st Holder	2 nd Holder		3' ^d Holder
Authorized Signatory	Authorized Signatory		Authorized Signatory
Name:	Name:	Name:	
For Bank Use			
CUSTOMER HAS SIGNED IN MY PRESENCE.			all Davids On the
Transfer of Account Approved By: (BM / BDA)	(Signature, Name and Emp. Code)	Sour	cing Branch Code:
Customer Copy / Acknowledgement			
			Date: D D M M Y Y Y Y
From Branch	1 10	Branch	
Bank Official Signature:			
Bank Official Name:		New AMB / AQB / A	AHB Required:
Branch Code:			

*Note: Account Transfer as requested for would be effective in the Bank's records within Maximum of 7 working days from the date of Receipt. In case of further assistance, you may kindly access the following link http://www.hdfcbank.com/common/customer_centre.htm to contact us.