## ACCOUNT TRANSFER FORM FOR CURRENT/SAVING ACCOUNT



(Please fill in the form in BLOCK LETTERS only, \* marked fields are mandatory and tick where applicable)

		Application Date: DDMMYYYYY
*I / We hereby request to transfer my/our b	oelow mentioned account from	
Branch (Existing Branch Name) to		Branch (New Branch Name)
A/c Number*:	Customer Id*:	
New Branch Code*:		
Account Title*		
Reason For Transfer Of Account		
	Important Note/Declaration/ Signatu	ıre
<ul> <li>Your Old Cheque book contains IFSC code whi However, you can use the existing Cheque book</li> <li>Standing Instructions, Debit Instructions for L Automatically.</li> <li>Request would be rejected if REKYC of the Curr</li> <li>For Branch Transfer from Rural / Semi Urban t location Branch</li> <li>I/we have read &amp; understood the Terms &amp; Conditions various services including but not limited to (a) ATMs Email Statements. I accept &amp; agree to be bound by Bank may, at its absolute discretion, discontinue any account for service charges as applicable from time Balance in the account. The Bank will not be liable / the transfer of my/our existing account. The Bank re</li> </ul>	k available with you.  Locker Charges and Sweep out Instructions if linker  Locker Charges Account is due.  Locker Charges Account is due.  Locker Charges Average Mont  Locker Charges Average Mont  Locker Charges Average Mont  Locker Charges Average Mont  Locker Charges Account is due.  Locker Charges Account is due.  Locker Charges and Sweep out Instructions if linker  Locker Charges Account is due.  Lo	ed to the Current/ Saving Account would be transferred thly / Quarterly Balance would be affected as per the new e transfer of an account with HDFC Bank & those relating to g (e) Net Banking (f) Bill Pay facility (g) Insta Alert Facility (h) ling/limiting the Bank's liabilities. I/We understand that the notice to me/us. I/We agree that the Bank may debit my/our uired to maintain the prescribed Average Quarterly/Monthly use / ECS issued by me/us and presented to the Bank post debits accruing on this account as a result of any claims or
Authorized Signatory	Authorized Signatory	Authorized Signatory
Name*:	Name*:	
	Customer Copy / Acknowledgemen	<i>&gt;</i>
From Bran-Branch Official Signature:	Receipt of your Branch Transfer request ch to Branch.	Branch Use  Account is KYC Complied.
Name of the Branch Official:		
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 <a href="http://www.hdfcbank.com/common/customer\_centre.htm">http://www.hdfcbank.com/common/customer\_centre.htm</a> to contact us.

CUSTOMER HAS SIGNED IN MY PRESENCE.								
Transfer of Account Approved By: (BM / BDA)	(Signature, Name and Emp. Code)	Sourcing Branch Code						

For Bank Use:

## For CPU Use

For CPU Use Only:	DVU	(Signature & Date)	scu	(Signature & Date)