

# Addition of Name in Individual SB / CA

(Page 1 of 2)

SB / CA No. \_\_\_\_\_

I/We, maintaining the captioned SB / CA with you, request you to add the name(s) of following persons as joint account holder(s) :

<b>1</b>	Name			
	Occupation		Relationship with 1st Account Holder	
	Signature			
<b>2</b>	Name			
	Occupation		Relationship with 1st Account Holder	
	Signature			
<b>3</b>	Name			
	Occupation		Relationship with 1st Account Holder	
	Signature			

Signature(s) of Existing A/c holders

Names	Signatures

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(Page 2 of 2)

1	2	3
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Paste recent passport sized photographs here and sign across.

The Account will henceforth be operated as under :

Mode of Operation  Either or Survivor  Anyone of us or Survivor(s)  
 Other \_\_\_\_\_

I / We consent to my / our name being added in the above mentioned SB / Current Account:

Specimen Signatures of ALL Account Holders

Names	Signatures

### FOR OFFICE USE ONLY

Signatures Verified		Added Records in System	
Scanned Signatures			

\_\_\_\_\_  
Date:


\_\_\_\_\_  
Signature(s) of Bank Officials

### Acknowledgement

Name	Cust ID
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Received Customer Request for Addition of Name in Individual SB / CA

Signature & Date Receipt Stamp

 **DCB 24-Hour Customer Care**  
**Email** [customercare@dcbbank.com](mailto:customercare@dcbbank.com)  
**Call** 3281 1322 ■ **Toll Free** 1800 209 5363  
**Website** [www.dcbbank.com](http://www.dcbbank.com)