

## ACCOUNT UPGRADE FORM

Date D D M M Y Y Y Y				
• Please complete this form in Black Ink and in CAPITAL LETTERS or 🔟 where applicable				
Name Customer ID	DETAILS OF Account No.	YOUR ACCOUNT		
UPGRADE/ PRODUCT CHANGE INFORMATION				
Existing Product  1 Online Savings Account  25K AMB* 10K AMB*  2 Online Corporate Salary Account Signature Debit Card Platinum  3 Others	m Debit Card		ngs Account OK AMB* Account	
Debit Card:  Do you have an existing debit card  Yes  No  If Yes, Note: Type of debit card that will be issued on the new product code will be linked to the savings account offering. In case an existing debit card is already issued on the account and is not in line with type of card applicable as per product offering, existing debit card will be hotlisted and a new debit card (with domestic usage) will be issued.  If No, Do you need an ATM/Debit Card  Yes  No  If Yes, Name on Debit Card  Yes  No  Cheque Book:  Please issue payable at par cheque book				
TELL US WHAT YOU DO FOR A LIVING (Only for Online Corporate Salary Account)				
Occupation (Select Anyone)				
1a) Salaried (Select Anyone) Public Private Government				
Corporate Name Doctor	CA Archite	ect Lawyer	Consultant Entertainment	
Professional Alternate Medical Practitioner Beautician Others				
1c) Self Employed Business Sole Proprietorship Partnership/Company No. of years in business < = 5 yrs > 5 yrs				
1d) Any other Occupation Homemaker Retired Farmer Politician Student Minor				
2) Source of Income Salary Business Professional Fees Investments Agriculture Family Wealth				
3) Gross Annual Income (₹)				
	DECLARATION	I & SIGNATURE(S)		
I/ We have read, understood and agree to the charges/costs, mentioned in the extant Schedule of Charges pertains to the banking facilities and products as well as the facilities and/or the other products which I wished to avail. This Schedule of Charges is also displayed on www.idfcfirstbank.com/soc.html I/We, the undersigned, have read, understood and agree to absolutely and unconditionally abide by and be bound by the Terms and Conditions displayed on website www.idfcfirstbank.com as revised from time to time by IDFC FIRST Bank Limited, in relation to all of my/our accounts, for present and future, maintained/opened/to be opened with IDFC FIRST Bank Limited.				
FIRST/ ONLY HOLDER	SECOND HO	DLDER (IF ANY)	THIRD HOLDER (IF ANY)	
Signature	Sic	nature	Signature	
Signature	Sig	nature	Signature	
Name Nam		lame	Name	

AMB\* = Average Monthly Balance in ₹



DANK LICE	CECTION			
BANK USE	SECTION			
Service Request No Emplo	Employee ID of customer			
Payment Details: (Applica	(Applicable in case new product code is staff account)			
Amount Cash (Only at the Branch)	Cash (Only at the Branch) Cashier's Signature Employee ID			
Mode of IP Cheque NEFT RTGS Cheque Date Date YYYY				
Bank Name Branch Name				
Other Details				
Existing Product Code	New Product Code			
orporate Code Lead Converter				
	(Applicable for all new product codes except Deposit Routing Account)			
Banker Certification: Required only if existing product needs In Person Verification(IPV)				
I have met the Customer at his: Residence Place of Work Other				
I have seen and verified the original KYC documents. Copy/photo	taken for record. The customer has Signed in my presence			
Name Date				
Employee D	Signature			

Product Code Key: 1001 - Savings Account 25k with Signature DC; 1004 - Sr Savings Account 25k with Signature DC; 1006 - Salary Account with Signature DC; 1020 - Online SA with Signature DC (Pre IPV); 1086 - Online Savings 10K (Pre IPV); 1041 - Savings Regular 10k; 1042 - Savings - Senior Citizen 10k; 1023 - Salary Account with Platinum DC; 1077 - Zero Balance Savings Account with Platinum DC; 1005 - Staff Savings Account; 1053 - Online Salary with Signature DC; 1054 - Online Salary with Platinum DC