

**DECLARATION FOR THUMB IMPRESSION/SIGNING  
IN VERNACULAR LANGUAGE**



**DECLARATION**

(This declaration must be signed by the employee of IDFC FIRST Bank and related to the account holder)

This is to certify that I have read out the contents of AOF for Mr./Mrs \_\_\_\_\_  
and he/she has understood the same.

Further, I would also like to certify that Mr./Mrs. \_\_\_\_\_ has affixed  
his/her thumb impression (left hand/right hand) or has signed in vernacular language in my presence after I have explained the  
contents to him/her.

Name of the Witness 1: \_\_\_\_\_ Name of the Witness 2: \_\_\_\_\_

Relationship with Account Holder: \_\_\_\_\_ Relationship with Account Holder: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Signature of Witness 1**

(Signature of Witness is not required for Vernacular Declaration)

**Signature of Witness 2**

(Signature of Witness is not required for Vernacular Declaration)

Name of the Account Holder \_\_\_\_\_

I confirm that the terms and conditions are explained by \_\_\_\_\_ in \_\_\_\_\_

I have understood and agree to the terms and conditions mentioned on AOF.

Signature/Thumb Impression:

**Signature and Stamp of Branch:**

Date 

D	D	M	M	Y	Y	Y	Y