BALANCE CONFIRMATION FORM



Please fill in Black Ink and in CAPITAL LETTERS All fields marked " * " are MANDATORY

Date]								1
	D	D	1	М	М	1	Y	Y	Y	Y	1

CUSTOMER DETAILS																																		
*Customer ID												*Account Number												er [
*Customer Name																																		

I/We hereby request you to kindly provide me Balance Confirmation Certificate for above captioned account as on:



DECLARATION & SIGNATURE(S)

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 maintained/to be opened with IDFC FIRST Bank Limited.

Signature as per Account Rule

Signature

Signature

Signature

Name of First Account Holder/ Authorised Signatory Name of Second Account Holder/ Authorised Signatory Name of Third Account Holder/ Authorised Signatory

 FOR BANK USE ONLY

 Service Request No.

 Employee ID

 Name of the

 Branch Official

 Sourcing

 Branch Code