

NAME CHANGE FORM

Individuals (Resident & Non Resident Indians)



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

Date
D D M M Y Y Y Y

CUSTOMER DETAILS

Customer Type Resident Non-Resident
 *Customer ID
 *Customer Name

NAME CHANGE DETAILS

I request you to update the name in my account. Necessary documents supporting the change in my name are enclosed for your records
 New Name of Applicant
 (to appear in Bank's records)
Note: Please ensure to use new cheques with the updated name for all future transactions.

DISCLAIMER

I understand that,
 • The existing cheques with old name will remain valid.
 • The name change will be done at customer ID level and will be applicable to all linked accounts.

I, 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 accounts, for present and future, maintained /opened /to be maintained /to be opened with IDFC FIRST Bank Limited.

I/We hereby give my/our consent to download my/our KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my/our identity and address from the database of CKYCR Registry. I/We understand that my/our KYC Record includes my/our KYC Records /Personal information such as my name, address, date of birth, PAN number etc.

Customer Signature

FOR BANK USE ONLY

Service Request No.
 Employee ID
 Name of the Branch Official
 Sourcing Branch Code

Signature of the Branch Official

- Customer has signed in my presence.
- Signature is verified with specimen signature available in bank record.