APPLICATION FOR LINKING / SEEDING AADHAR NUMBER AND RECEIVING DBT BENEFITS INTO BANK ACCOUNT – (NPCI MAPPING)

FEDERAL BANK
YOUR PERFECT BANKING PARTNER

The Branch Manager.

Date | D | D | M | M | Y | Y | Y | Y |

…………………………………………… Bank

…………………………………………… Branch

Dear Sir,

Account No. ……………………………………………………………………… in A/c Name ……………………………………………………………………………………… **Linking/Seeding of Aadhaar in**

NPCI – Mapping for receiving Direct Benefits.

1. I am maintaining a Bank Account No. ………………………………………………………………………… with your Branch.
2. I submitted my Aadhar number and voluntarily give my consent to:
   Use my Aadhar Details to authenticate me from UIDAI.
   Use my mobile Number mentioned below for sending SMS Alerts to me.
   Link the Aadhar Number to all my existing new future accounts and customer profile (CIF) with your Bank.

(Signature / Thumb Impression of Customer)

PART B

	Option for Receiving DBT Benefits (Tick One)
	I wish to seed my Account No. ……………………………………………………………………… with NPCI mapper to enable me to receive Direct Benefits Transfer (DBT) including LPG subsidy from Govt. of India (GOI) in my above account. I understand that if more than one Benefit transfer is due to me. I will receive all the benefit transfers in the same account. **(for customer who have not so for seeded account with NPCI Mapper)**
	I already have an account with ……………………………………………………………… (Name of Bank) having IIN Number** ………………………………… and seeded with NPCI Mapper for receiving DBT form GOI. **I request you to change my NPCI Mapping (DBT Benefit Account)** to my account with your bank.
	I already have an account with another bank ………………………………………………………………… (Name of Bank) having IIN Number** and seeded with NPCI Mapper for receiving DBT form GOI. **I do not want to change my NPCI Mapping (DBT Benefit Account)** from the existing Bank.
	I do not wish to seed my accounts from your Bank with NPCI Mapper **(I will not be getting DBT)**

3. I have been explained about the nature of information that may be shared upon authentication. I have been given to understand that my information submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law.
4. I hereby declare all the above information voluntarily furnished by me is true, correct and complete.

Your faithfully

(Signature / Thumb Impression of Customer)

* **NPCI Mapping:** Mapping is a process of associating a Bank with Aadhaar number which is facilitated by NPCI for Direct Benefit transfer to the respective Bank who have linked the Aadhar Number to a Specific Bank Account for receiving Direct Benefits to which customer has given the consent.

** IIN Number will be provided by Bank receiving the Consent Application.

Name: …….

Mobile No.: ……

Email: …….

Encl: Copy of Aadhaar: ………

[if consent sent through BC/BDO/VO]

I hereby authorize the Banking Correspondent …………………………………………………………………………………

I hereby authorize the Sarpanch / V.O./B.D.O./ ………………………………………………………………………………… to submit the above consent letter to the bank.

(Signature / Thumb Impression of Customer)