



Assam Gramin Vikash Bank

Annexure-I

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

The Branch Manager,
..... Branch
Assam Gramin Vikash Bank

Date: _____

Dear Sir,

Account No. _____ in A/c Name _____ Linking / seeding of Aadhar
in NPCI-Mapping for Receiving Direct Benefits

- I am maintaining a Bank account No. _____ with your Branch.
- I submit my Aadhaar number and voluntarily give my consent to:
 - Use my Aadhaar Details to authenticate me from UIDAI.
 - Use my Mobile Number mentioned below for sending SMS Alerts to me.
 - Link the Aadhaar Number to all my existing/new/future accounts and customer profile (CIF) with your Bank.

(Signature/Thumb Impression of Customer)

OPTION FOR RECEIVING DBT BENEFITS (TICK ONE)

- I wish to seed my account no. _____ with NPCI mapper to enable me to receive Direct Benefit 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 far 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 from 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 from GOI. **I do not want to change my NPCI mapping (DBT Benefit Account) from the existing Bank. I am linking my UID to enable AEPS transactions.**
- 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.
 - I hereby declare that all the above information voluntarily furnished by me is true, correct and complete.

Yours faithfully

(Signature/Thumb Impression of customer)

Name:

Mobile No:

Email:

Encl: Copy of Aadhaar

[if consent sent through BC/BDO/VO]

- I hereby authorise the Banking correspondent
.....
- I hereby authorise the Sarpanch, V.O./B.D.O./
.....
to submit the above consent letter to the bank.

(Signature/Thumb Impression of customer)

*NPCI Mapping: Mapping is a process of associating a Bank with Aadhar 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.