



VASAI JANATA SAHAKARI BANK LTD.

Regd. Office : 'Bhagwat Wada', Parnaka, Vasai, Dist. Palghar - 401 201.

Admn. Office : 'Mrudgandh', Azad Road, Parnaka, Vasai, Dist. Palghar - 401201.

Phone : 0250 - 2308898, 2308327, Fax : 2308371, Email : ho@vjsbl.com, Web : www.vjsbl.com

Bank Account - Aadhaar Linkage Application Form

To,
Branch Manager,
Vasai Janata Sahakari Bank Ltd.,
_____ Branch

Sir,

I Mr./Mrs. _____ have Savings Bank Account in you bank and I request / authorize you to please seed / link my Aadhaar Number to my account number in your bank for receiving LPG Subsidy / Salary / Pension or any other benefits paid by various Government Authorities.

1. Details are mentioned below, (15 digit A/c No.)

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2. Write Name (in English) :

Surname	First Name	Middle Name

3. Address (in English) : _____

City / Village : _____ District : _____

State : _____ Pincode : _____

4. Aadhaar Number (Write your 12 digit Aadhaar Number as per Aadhaar letter / Card)*

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Or Enrollment No. if Aadhaar Card is not Received.

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5. Gender (✓ in appropriate place) : Male Female

6. Mobile Number

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 7. PAN Card No.

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Date : (dd/mm/yyyy) ____/____/____

Place :

Signature

*Please securely attach a clear / legible copy of your Aadhaar letter / card with this request form and make sure that the number entered in this form is as per the Aadhaar letter.

VASAI JANATA SAHAKARI BANK LTD.

ACKNOWLEDGEMENT

Received Aadhaar seeding request from Mr./Mrs./Ms. _____

having A/c. No.

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A. The request is complete and the seeding linking confirmation will be sent to you within 7 days.

B. Aadhaar seeding request form is incomplete. Please submit with complete details and legible copy of Aadhaar Card.

Date : (dd/mm/yyyy) ____/____/____ Branch :

Signature of Bank Official with seal