

**RAJARAMBAPU SAHAKARI BANK LTD; PETH** (Scheduled Bank)

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

The Branch Manager,

Date :

\_\_\_\_\_ Branch  
\_\_\_\_\_ Bank

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.

2. I submit 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)

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 I.P.G. Subsidy from Govt. of India (GOI) in my above account. I 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 do not want 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 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 that all the above information voluntarily furnished by me is true, correct and complete.

Yours faithfully

[ if consent sent through BC/ BDO/ VO]

(Signature/ Thumb Impression of customer)

I hereby authorise the Banking Correspondent

Name :

\_\_\_\_\_ I hereby authorise the Sarpanch/ V.O./B.D.O/

Mobile No.:

\_\_\_\_\_ to submit the above consent letter to the bank.

Email :

Encl: Copy of Aadhar

\*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 the consent Application