

# India Post Payments Bank Limited

AFFIX RECENT PASSPORT  
SIZE PHOTOGRAPH OF THE  
APPLICANT

Please sign  
across, sign  
should overlap on  
photo & APEF

Sign across  
the photograph

## BUSINESS CORRESPONDENT APPLICATION FORM

Corp. Office: 2<sup>nd</sup> Floor, Bhai Veer Singh Marg, Gole Market, New Delhi – 110001  
Tel: +91-11-23362148 Website: www.ipponline.com | Email: contact@ipponline.in

Please fill the form in English with black ink and use BLOCK  
LETTERS

New  Existing

\* Mandatory to be filled

### 1. BUSINESS CORRESPONDENT DETAILS

\* Name

\* Contact Number

\* Address Line 1   
\* City/District Line 2   
\* State  \* Pin Code

\* Alternate No.

\* PAN  (Please fill Form 60 if you do not have PAN)

Email ID

\* Latitude  \* Longitude

\* Father's Name   
First Name Middle Name Last Name

\* Mother's Maiden Name

\* Date of Birth: (DD-MM-YYYY)  \* Gender  Male  Female  Transgender

\* Nationality

\* Proof of ID (POI)  Passport  Driving License  Election Commission Voter ID Card  Income Tax Pan Card  Aadhaar Identity Card  Job card issued by NREGA duly signed by an officer of the state government

\* Proof of Address (POA)  Passport  Driving License  Election Commission Voter ID Card  Aadhaar Identity Card  Job card issued by NREGA duly signed by an officer of the state government

### 2. BANK DETAILS

\* Branch Name  \* IFSC

\* Account Name (As per bank record)

\* Account Type  Saving a/c  Current a/c

\* Account Number

### 3. BUSINESS CORRESPONDENT DECLARATION\*

I have read and understood the terms & conditions provided in agreement and unconditionally accept them as binding on me. I hereby declare that the particulars given herein are true, correct and complete in all respects and the documents submitted along with this 'Business Correspondent Enrollment form' are genuine. I hereby undertake to inform India Post Payments Bank Limited of any change in the information provided herein above.

Date : \_\_\_\_\_

Place : \_\_\_\_\_

Business Correspondent signature and stamp

### FORM NO. 60 [See second proviso to rule 114B]

Form for declaration to be filed by an individual or a person (not being a company or firm) who does not have a permanent account number and who enters into any transaction specified in rule 114B

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_

Father's Name \_\_\_\_\_

Address \_\_\_\_\_

Pin Code \_\_\_\_\_ Telephone Number with STD Code \_\_\_\_\_ Mobile Number \_\_\_\_\_

Amount of Transaction (First Cash in amt) \_\_\_\_\_ Date of Transaction \_\_\_\_\_

In case of transaction in joint names member number of person involved in the transaction \_\_\_\_\_

Mode of Transaction: Cash  Cheque  Card  Draft/ Bankers' Cheque  Online transfer  other

Aadhar Number issue by UIDAI (If available) \_\_\_\_\_

If applied for Pan and it is not yet generated enter date of application & Acknowledgement No. \_\_\_\_\_

If pan not applied fill the estimate total income (Including spouse, Minor, Child etc. as per the section 64 of income tax act 1961 for the financial year which the above transaction held

(a) Agriculture income (Rs.) \_\_\_\_\_ (b) Other than Agriculture income (Rs.) \_\_\_\_\_

Detail of the document being produced support of identity Proof \_\_\_\_\_

(Doc code) (Doc identification number) (Doc issued authority Name & Address)

Detail of the document being produced support of address Proof \_\_\_\_\_

(Doc code) (Doc identification number) (Doc issued authority Name & Address)

Verification: I, \_\_\_\_\_ do hereby declare that what is stated above is true to the best of my knowledge and belief. I further declare that I do not have a Permanent Account Number and my/ our estimated total income (including income of spouse, minor child etc. as per section 64 of Income-tax Act, 1961) computed in accordance with the provisions of Income-tax Act, 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax.

Verified today, the \_\_\_ DD \_\_\_ day of \_\_\_ MM \_\_\_ 20 \_\_\_ YY \_\_\_ Place: \_\_\_\_\_

(Signature of declarant)

Note: For List of Documents, Please see overleaf.

## List of Documents

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### Individual Identity

- |                          |  |                          |  |
|--------------------------|--|--------------------------|--|
| <input type="checkbox"/> | i. Proof of identity (Any of the below)  | <input type="checkbox"/> | d. Certificate/ registration document issued by sales tax/ services tax/ professional tax authorities  |
| <input type="checkbox"/> | a. Passport,   | <input type="checkbox"/> | e. License issued by the registering authority like Certificate of Practice issued by institute of Chartered Accountants of India, Institute of Cost Accountants of India, Institute of Company Secretaries of India, Indian Medical Council, food and Drug Control Authorities, importer / exporter, registration / licensing document issued in the name of the proprietary concern by the Central Government or state Government /Authority / Department. |
| <input type="checkbox"/> | b. Driving license,  |                          |  |
| <input type="checkbox"/> | c. Voter Id Card,  | <input type="checkbox"/> | f. The complete Income Tax Return (Not Just the acknowledgement) in the name of the sole proprietor where the firm's income is reflected duly authenticated /acknowledged by the Income Tax Authorities.   |
| <input type="checkbox"/> | d. Pan card,   |                          |  |
| <input type="checkbox"/> | e. Aadhaar identity card,  | <input type="checkbox"/> | g. Utility bills such as electricity, water and landline telephone bill in the name of proprietary (Not more than 2 months old).   |
| <input type="checkbox"/> | f. Job card issued by NREGA duly signed by an officer of the state government                  | <input type="checkbox"/> | h. Certificate under Shop & Establishment Act.   |
| <input type="checkbox"/> | ii. Proof of address (Any one of the below)  |                          |  |
| <input type="checkbox"/> | a. Certificate/License issued by the Municipal authorities under the shops & establishment act |                          |  |
| <input type="checkbox"/> | b. Sales and income tax return   |                          |  |
| <input type="checkbox"/> | c. CST/VAT certificate   |                          |  |