Application Form - Add-on RuPay Debit Card



Platinum Classic RuPay	Debit Card	
Details of Add-on Applicant	Di	Date :
*Applicant Title Mr. Mrs. Ms. Dr.	*First Name	
	*Middle Name	
*Date of Birth	*Surname	
Nationality Resident Indian Foreign National		
Gender M F T		
*Relationship with Primary Holder S	pouse Son / Daughter (Over 18 Yrs.) Brother / Sister (Over 18 Yrs.)	Parents
Address Company		
Address		
Landmark		
City		State
STD Code Land Contact Number	line No E-mail ID	
KCCB Bank Saving AC No.		
*Details of the Primary Applicant *Name KCCB BANK DEBIT CARD No. * (as mentioned on the Debit card)		
*KYC document required ID document (Any one of the below	(All Document need to be self attested by the Add on applican	int)
I—	ction Copy of Photo Identity issued by Govt. Defense Service / Public Sector under Card) Issued by Central / State Government / AADHAR CARD Copy of Valid Driving I	
Address Proof (Any one of the belo	w)	
Copy of Government ID card with photo an		ce bill/water bill / gas bill/latest property tax (Not more than 3 months old)
addressed to me. I understand and undertak	or Resident Indian spouse, brother, sister or child over 18 years of age) Further, I Agree e that the usage of the KCCB Bank card shall be strictly in accordance with all applicat d in the event of any failure to do so I will be liable for any action	
Place :		
Date :		Primary Applicant Signature
* For Office Use Only		
Address & Customer Details verified		
Officer Sign		
ABM Sign Date		