(Consent Form for Conversion of existing Saving Account to PSB Bharat Connect SB Salary Account)

The Branch Manager
Punjab & Sind Bank
Branch Name: _____

Date:

Dear Sir/Madam,

Reg: Request for Conversion of Savings Account No. _____to PSB Bharat Connect SB Salary Account.

Variant : ☐ PSB Bharat Connect – 'Vista' [For Central Government department and Ministries]

☐ PSB Bharat Connect – 'Omni' [For State/UT Government department and Ministries, Central and State PSUs]

Applicant CIF ID :

Applicant Name : Mobile Number :

Category of Employee: ☐ Serving ☐ Pensioner Email ID :

1. I/We, request the conversion of my Savings Account No. _____ to _____ variant of PSB Bharat Connect SB Salary Account.
2. Auto Sweep facility: (Please tick in the appropriate option)

☐ I/We do not wish to avail of this facility (OR)

☐ I /We wish to avail this facility and authorize you to transfer amount in excess of Rs 25000/- (Rupees Twenty Five Thousand.) from my/our Savings Bank Account No. _____ on any day into Bank's Flexi Fixed Deposit Product for the period of _____Days / months in multiple of Rs. 5000/-.

I/ We further authorize the Bank to meet the inadequacy of funds (at any point of time during the currency of account) in my Savings account as mentioned above by way of matured/ premature closure out of the available flexi fixed deposit in unit/s of Rs.5000/- and transferring the required amount into the said PSB Central Connect Savings Account.

I/We understand and agree to the following:

i. All benefits will be available to the first/primary account holder as long as the account remains under the eligible scheme variant.

ii. **Nomination for Insurance Benefits**

I/We nominate the following person(s) to receive the insurance claim amount in the event of my demise,

Name of Nominee	Address	Email/Mobile No. (if any)	Relationship	Date of Birth

If nominee is a minor, I hereby appoint Shri/Smt./Kum _____,aged _____ residing at _____to receive the sum due under the insurance claim on behalf of the nominee during his/her minority.

iii. I/we am/are presently employed as _____ with _____ my Service/Employee No. is _____.

iv. I/We shall obtain a No Objection Certificate letter from P&SB in case I desire to change to any other Bank for credit of Salary. I further undertake that I shall not seek to change my salary bankers from P&SB unless I have liquidated all loans outstanding with P&SB.

v. Bank will convert my Salary account to General Savings account without my consent in case no salary is credited in account for continuous three months.

vi. Applicable charges of all services as per the converted scheme shall be levied as per bank's extant guidelines.

vii. I affirm that the details provided are true and accurate to the best of my knowledge. I undertake to inform P&SB in case of any change in the information declared above.

viii. I hereby also undertake to abide by the extant guidelines of RBI/ IRDA/ PFRDA & NPCI regarding the opening & maintenance of my account(s).

ix. The Special Benefits under this scheme shall be withdrawn at the sole discretion of the Bank.

x. The Bank shall act as a facilitator between the customer and the Insurance Company.

Date :

Signature of Applicant(s)
Name & Address