## (FILLED UP FORM SHOULD BE SUBMITTED TO AUTHORISED PERSONS ONLY)

Form 2-A

## APPLICATION FORM FOR AADHAAR SEEDING OF BANK ACCOUNT OF BENEFICIARY

(Form-Filling and Submission to Bank to be facilitated by AWW/ ASHA /ANM)

Mandatory fields*	i.
	BANK
The Branch Manager	
Bank	
Branch	Date (dd/mm/yy):
Dear Sir/Madam,	
Seeding of Aadhaar / UID Number with the account	
Bank Account Number:	9
I am maintaining a Bank Account in name with above mentioned b	ank account number with your Branch
(Branch name). I submit my Aadhaar numb	er and voluntarily give my consent to;
<ul> <li>Seed my Aadhaar/UID number issued by the UIDAI, Governmaccount.</li> </ul>	nent of India in my name with my aforesaid
<ul> <li>Map it at NPCI to enable me to receive Direct Benefit Transfer account. I understand that if more than one Benefit transfer is in this account</li> </ul>	(DBT) from Government of India in my above due to me , I will receive all Benefit Transfers
<ul> <li>Use my Aadhaar details to authenticate me from UIDAI</li> </ul>	
<ul> <li>Use my mobile number and/or Email (if available) mentioned below for sending SMS alerts to me.</li> </ul>	
The particulars of the Aadhaar/ UID letter are as under:	
Aadhaar number:	
Name: (As in Aadhaar card) (Enclose self	f-attested copy of Aadhaar)
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.  Yours faithfully,	
	e/ Thumb impression of the account holder)
(To be provided to Beneficiary by Bank throu	
The following Account number:	
	ranchhas been seeded with
Of Smt with	
1-11-11-11-11-11-11-11-11-11-11-11-11-1	
Date (Bank's authorize	