Digital Apna Money Agent Registration Form

(Fields with * are compulsory)

Affix Photo

* Name of Person: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
First Middle Last

* Name of Firm/Company (Optional): ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

* DOB: ☐☐ ☐☐ ☐☐☐☐ Mobile No. (Owner): ☐☐☐☐☐☐☐☐☐☐

* Sex: **M** ☐ **F** ☐ *Pan No (With Proof): ☐☐☐☐☐☐☐☐☐☐

* Aadhaar No. (With Proof): ☐☐☐☐☐☐☐☐☐☐☐☐

* Bank A/c No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ *IFSC Code: ☐☐☐☐☐☐☐☐☐☐☐

* Residence Address: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
☐☐

City: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Pin Code: ☐☐☐☐☐☐ State: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

* Office Address (With Proof): ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
☐☐

City: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ State: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Pin Code: ☐☐☐☐☐☐ Office. Phone ☐☐☐☐☐☐☐☐☐☐

* Email ID: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Payment Detail: ☐ Cheque ☐ NEFT/RTGS Date: ☐☐ ☐☐ ☐☐☐☐

Amount: ☐☐☐☐☐☐☐ Cheque/NEFT/RTGS ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Bank Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

I, hereby declare that the information provided by me in the above form is true to the best of my knowledge and belief.

Date:

Place:

Reference by: