Application Number Bar Code



IDBI Bank Add-on Credit Card Application Form

Information is mandatorily required in the field marked with asterisk (*). A self-attested copy of PAN Card and Relationship Proof are to be provided along with Add-on Card Application Form.
Liability of the Supplementary Credit Card will be on the Primary Card Member
2. Add-on Card can be issued to family members (over 18 years of age) of the Primary Card Member
Credit Card Number*
Name of Primary Card Holder* Mr. Mrs. Ms. Dr.
Add-on Card Applicant Details
Applicant 1
Name of Add-on 1 Applicant* Mr. Mrs. Ms. Dr. Add-on 1
Name as desired on card* Please paste recent Passport size colored
Gender* Male Female Third Gender Date of Birth* D D M M Y Y Y Y
Relationship to Primary Card Holder* Spouse Parent Sibling Child Signature Across
PAN No.* Mobile No.*
Aadhaar No.* Nationality Resident Non-Resident
E-mail ID*
Existing IDBI Bank Customer Yes No if yes Customer ID
Applicant 2
Name of Applicant* Mr. Mrs. Ms. Dr. Add-on 2
Name as desired on card* Please paste recent Passport size colored
Gender* Male Female Third Gender Date of Birth* D D M M Y Y Y Y Y
Relationship to Primary Card Holder* Spouse Parent Sibling Child PAN No.* Mobile No.*
PAN No.* Mobile No.* Signature
Aadhaar No.* Nationality Resident Non-Resident
E-mail ID*
Existing IDBI Bank Customer Yes No if yes Customer ID
I accept that the usage of the card shall be in accordance with the Exchange Control Regulations of the Reserve Bank of India and the Foreign Exchange Management Act, 1999 and that failure to do so would make the add-on-card holder liable for action under the Foreign Exchange Management Act, 1999.
Signature of Add-on Cardholder 1 st Signature of Add-on Cardholder 2 nd
Declaration
I understand that I wish to avail an additional Card for Mr. / Mrs / Ms. / Dr. (Name), my (Relationship).
The add-on-card fee, as applicable will be billed in my statement. I agree that it will be my responsibility to provide identity and address or any other additional documents and/or information of the Add-on Cardholder that may be required by IDBI Bank in future.
I/We understand and agree that OTP and Transaction Alerts for the transactions relating to Add-on Card (s) be sent on the registered mobile number (s) of the respective Add-on Cardholder(s) as well as the Primary Cardholder. I understand that I am liable to honour all charges incurred on the add-on-card.
I accept that the use of the add-on-card by the add-on-card holder constitutes acceptance of the Terms and conditions as amended from time to time and constitutes an undertaking from add-on-card holder that the usage of the card shall be in accordance with the Exchange Control Regulations of the Reserve Bank of India and the Foreign Exchange Management Act, 1999 and that failure to do so would make the add-on-card holder liable for action under the Foreign Exchange Management Act, 1999. I accept that the facility of an add-on-card will stand automatically terminated in case of termination of membership of the primary cardholder.

Signature of Primary Cardholder