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INACTIVE AND DORMANT ACCOUNT ACTIVATION FORM

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Name :(Primary Applicant): (Details to be filled in			st Nan		S)			IV	liddle	e N	ame							L	.ast	Na	me			-								
To, The Branch Manager ICICI Bank Ltd. Dear Sir/Madam, I/We			_																											(cont	firm
that I/we have not ope																																
I/We request you to a provided.(*Only applied)		n ca		cha	ange	in c					-					con	nmı	unio	cat	ior	n a	ddı	res	ss*	as	pe	r tl	he a	add	res	s pı	roof
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(Primary Holde	r)	_	(Joint Holder1)						_	(Joint Holder 2)											(Joint Holder 3)											
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Employee Signature								_	S	igı	nat	ure	e of	В	ran	ch	Ma	ana	ge	er _												
Verifier's employee IE	D 🗌					ar	nd :	Sig	ınat	tur	re _														_							