

**FARMER REGISTRATION FORM**

(Fields marked with \* are mandatory)

**PERSONAL DETAILS**

Title: *	Mr./Mrs./Ms.	Aadhar No.	
First Name: *		PAN No.:	
Middle Name:			
Last Name: *		Gender: *	<input type="checkbox"/> Male <input type="checkbox"/> Female

**CONTACT DETAILS**

Address Line 1 *		Phone No (Work)	
Address Line 2		Phone No (Mobile) *	
Post Office		(If not available, put "00000000000")	
City/Village *			
Block/Mandal/Taluka/Tehsil		Fax No.	
District *		E-mail 1	
State *		E-mail 2	
Pin Code *			

**BANK DETAILS (If bank details are not provided, then credit of claims in account is not possible)**

Account Name *		Bank Name *	
Branch Name *		IFS Code *	
Branch Address *		(If not available, put "00000000000")	
Account Type *		Account Number *	
Bank Phone No *			

**PARTY ATTRIBUTES**

Date of Birth <small>(dd/mm/yyyy)</small>		Occupation/Trade *	
Father/Husband Name *		Farmer Classification *	Rural/Urban/Not Specified
Total Land Holding (ha) *		Farmer Category *	Small/Marginal/Others
Farmer Religion *	Hindu/Muslim/Sikh/Christian/Others	Farmer Community *	Gen/OBC/SC/ST/Not Specified
Any Other ID Type	Ration Card/Voter ID/Driving License/Other_____	ID No	
Farmer Type *	<input type="checkbox"/> Loanee <input type="checkbox"/> Non Loanee		

**NOMINEE DETAILS**

Title:	Mr./Mrs./Ms.		
Nominee First Name		Nominee Middle Name	
Relation to Party		Nominee Last Name	

**FREE SMS SUBSCRIPTION**

Do you want to subscribe by SMS alerts	<input type="checkbox"/> Yes <input type="checkbox"/> No	Subscribe to new business	<input type="checkbox"/> Yes <input type="checkbox"/> No
Subscribe to claim intimation	<input type="checkbox"/> Yes <input type="checkbox"/> No	Subscribe to other value added services	<input type="checkbox"/> Yes <input type="checkbox"/> No

**I CERTIFY THAT THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE & BELIEF**

Place:		
Date:		
Witness:		
(in case of Thumb impression)	Agent Name & ID	Signature/Thumb Impression of Farmer