INDRAYANI CO-OP BANK LTD

Plot no-109/B, CTS No-1480, Near Sadhu Vaswani Udyan, Pimpri, Pune-411017.

APPLICATION FORM FOR ATM / DEBIT CARD FOR INDIVIDUALS

IMPORTANT INSTRUCTIONS

- Please fill the entire form in CAPITAL LETTERS.
- Leave one box space between each word.
- Do not write outside the provided boxes
- Complete all selections.
- Sign the declaration.
- If joint A/c please fill another application form.

New ☐ Renewal ☐ Replacement ☐

1. Primary Account Details: Saving ☐ Current ☐

Account No: Customer ID:

2. Name of Applicant/Account Holder: Mr. ☐ Mrs. ☐ Miss. ☐ Date Of Birth:

(Surname) (First name) (MIddle Name)

Name :

Name as you would like it on thr card (max. 25 letters (including spaces)

3. Address for Correspondence			
City/State		Pin	
Mobile No.		E-Mail	

4. Office Address			
City/State		Pin	
Mobile No.		E-Mail	

5. Communication Address: Office ☐ Residence ☐

6. For Linking Secondary A/C's to the Primary Card

Saving ☐ Current ☐ A/C No. 1

Saving ☐ Current ☐ A/C No. 2

Photograph of Applicant /Primary account holder

7. DECLARATION: I/ We declare that the above information is correct. I acknowledge receipt of terms and conditions applicable to ATM Debit Card and I have read and accepted the same. I hereby request the bank to issue me ATM Debit Card and to recover the applicable charges/fees from time to time to the debit of my primary Account.

8. Signature of Appimcant

Siganture of Joint Account HOlder (If any)

Date: Place:

For Office Use

New	Renewal	Replacement	Date

ATM Branch Code		Branch Manager's Signature & Branch Stamp
Customer / Link Branch Code		
Issue Card Yes / No		
Daily Limit Rs.		

Old ATM Card No.	
New ATM Card No.	

Old ATM Card to be mentioned for a replacement or renewal of the card