# VIKRAMADITYA NAGRIK SAHKARI BANK MARYADIT

V.D. CLOTH MARKET, UJJAIN (M.P.)

Ph.: 0734 - 2557530, 2563027 • TOLL FREE NO.: 1800 890 4429

## Rupay ATM DEBIT CARD APPLICATION FORM

Date :

(Please write in BLOCK letters & tick ✓ whichever is applicable)

Application No. :

| New | | Renewal | | Replacement | |
|---|---|---|---|---|---|

Name

Name to be embossed on the card (max. 18 characters including spaces)

| | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Address | | | | | | | | | | | | | | | | | | | | | |
| City | | | | | | | | | | | | | Pin Code | | | | | | | | |
| Telephone | | | | | | | | | Mobile | | | | | | | | | | | | |
| PAN No. | | | | | | | | | | | Gender | | Male | | | Female | | | | | |
| Date of Birth | | | | | | | | | Email : | | | | | | | | | | | | |

Account to be linked to the card

| Savings | | Current | |
|---|---|---|---|

Bank Account No. (15 digit A/c No.)

| | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

| Type of ATM Card applied for | Rupay ATM Debit Card |
|---|---|

**DECLARATION :** I/We have read and accept the terms & conditions governing the usage of ATM Debit Card. I/We accept to be bound by the said terms & conditions and to any changes made therein from time to time by the bank at its sole discretion without any notice to me/us.

| Branch Name : | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

1st Applicant's Signature

2nd Applicant's Signature

3rd Applicant's Signature

### FOR BANK USE

| New | | Renewal | | Replacement | | KYC Complied | Yes | | No | |
|---|---|---|---|---|---|---|---|---|---|---|

| Customer Signature & Mode of Operation of Account Verified | Yes | | No | |
|---|---|---|---|---|

| CIF No. | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|

| Old ATM Card No. | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

| Issue Card | Yes | | No | |
|---|---|---|---|---|

| Date : | | | | | | | |
|---|---|---|---|---|---|---|---|

Branch Official's Signature & Stamp

*Mandatory SMS registration for ATM Card Holders.