



Poornwadi Nagrik Sahakari Bank Maryadit, Beed.

H.O. - Subhash Road, Beed - 431 122. PH. (02442) 230576

APPLICATION FOR ISSUE OF THE ATM CARD

SECTION (A) - PERSONAL INFORMATION

DATE OF APPLICATION:

BRANCH:

(Note : Please fill the form in Capital Letters & Tick Mark (✓) as applicable)

Name of the Applicant (As to be embossed on the Card, 18 characters only)

Account Operated By : Individual/Either or Survivor/Any One/Proprietor

Account No.

Name of A/C Holder :

MALE/FEMALE

Residential Address of the Applicant

Tel. Mobile E-Mail

Card Request : New Replacement for Stolen / Lost / Damaged Card / Renewal

SECTION (B) - DECLARATION & UNDERTAKING OF APPLICANT

I accept and agree to be bound by the said Terms and Conditions including those excluding/limiting the Bank's liability. I understand that the Bank may, at its absolute discretion, discontinue any of the service completely or partially without any notice to me. I agree that Bank may debit my account for service charges as applicable for time to time.

Name/s

Signature/s

1. _____

2. _____

* FOR BRANCH USE ONLY *

New Card No.

App. No.

SECTION (C) - BRANCH VERIFICATION AND RECOMMENDATION

Account Type : Savings

Date of A/C. Opening :

Recommended to issue ATM CARD

Application Rejected

Checked By : Name : _____

Sign : _____

Date : _____

Manager _____

Branch _____