LANGPI DEHANGI RURAL BANK

SPONSORED BY STATE BANK OF INDIA

APPLICATION FORM

ATM-Cum-Debit Card/Kisan Card

(For existing Account Holders only)

The Branch Manager,
Langpi Dehangi Rural Bank,
_____ Branch.

Dear Sir / Madam,

I request you to register me for ATM-Cum-Debit Card ☐ Kisan Card ☐
My Name

(AS IT SHOULD APPEAR IN THE CARD)

** MY ACCOUNT NOS. ** **EXAMPLE:**

2	6	0	0	1	0	0	1	7	3	8

Savings A/c											Overdraft A/c											
Current A/c											KCC A/c											

Accounts on which I require Card Services

Primary Account	Savings A/c		Current A/c		Overdraft A/c		KCC A/c	
Secondary Account	Savings A/c		Current A/c		Overdraft A/c		KCC A/c	

MY PERMANENT ADDRESS FOR COMMUNICATION:

_____

_____

E-mail _____ Tel (O) ☐☐☐☐☐☐☐☐☐☐

Mob. No. ☐☐☐☐☐☐☐☐☐☐ Tel (R) ☐☐☐☐☐☐☐☐☐☐

Date of Birth ☐☐☐☐☐☐☐☐ Pan Card No. ☐☐☐☐☐☐☐☐☐☐

Mother's Maiden Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

MY PRESENT ADDRESS FOR COMMUNICATION :(If different from above)

_____

_____

E-mail _____ Tel (O) _____ (R) _____
Mobile Nos._____ Fax No._____

I confirm that I am the sole Account Holder / the Sole Drawer in (For E or S A/cs) / one of the drawers (E or S or Any of Survivor A/cs). I also confirm having read and understood the terms and conditions of ATM Card Services and agree to abide by the same.

Place: _____ Date _____ Signature

CARE: All particulars except email address to be filled in capital letters

Important Terms & Conditions:

(i) Card holder will comply with KYC Norms
(ii) Card holder will keep secrecy of the PIN No.
(iii) Card holder will immediately inform the branch in the event of loss of the card.
(iv) Any usual charges levied will be borne by the Card holder.
(v) For A/c having Mode of Operation as JOINTLY, ATM Card services are not available.
(vi) The Bank at its discretion may amend the Terms and Conditions governing ATM services and this Card.
(vii) For other terms and conditions, please refer to the user guide for ATM Cards or visit Bank's website.

(FOR OFFICE USE)

1. The signature, name and account No. furnished by the applicant tallies with those in Branch records.
2. The Applicant is the sole a/c holder or he has the required mandate to operate the a/c linked to the ATM Card singly.

Branch:
Date:

BRANCH MANAGER

☐ ATM Card ☐ Kisan Card Date of data sent to C-Edge ☐☐☐☐☐☐☐☐