

# JAIN CO-OPERATIVE BANK LIMITED.

Registered Office 80, Darya Ganj New Delhi - 110 003.



## अहिंसा परमो धर्म: DECLARATION

I/We affirm, confirm and undertake that I have read and understood the Terms and Conditions for usage of RuPay Debit Card / SMS Alerts service of Jain Co-Operative Bank Limited. I agree on my own behalf or as the mandate holder on behalf of the joint / account holders and will adhere to all the terms / conditions of opening, availing and operating usage of RuPay Debit Card / SMS Alerts service as may be in force from time to time.

I/We declare that all the particulars and information given in this application from ( and all documents referred or provided therewith) are true, correct, complete and up - to - date in all respects and I and other joint account holders have not withheld any information.

I/We agree and undertake to provide any further information that Jain Co-Operative Bank Limited. may require. I agree and understand that Jain Co-Operative Bank Limited. reserve the right to reject any application without providing any reason. I agree and understand that Jain Co-Operative Bank Limited. reserves the right to retain the application forms and the documents provided therewith and will not return the same to me/us.

I/We authorize Jain Co-Operative Bank Limited. or their agent to make references and enquires which Jain Co-Operative Bank Limited. consider necessary in respect of or in relation to information provided by me/us in this application.

I/We authorise the Bank to debit my/our primary account for any charges payable by me for the activation/ subsequent transactions / deactivation of services as determined by the bank or by the regulatory authorities from time to time.

Signature of Applicant(s)

1<sup>st</sup> Applicant

Name : \_\_\_\_\_

2<sup>nd</sup> Holder

Name : \_\_\_\_\_

3<sup>rd</sup> Holder

Name : \_\_\_\_\_

4<sup>th</sup> Holder

Name : \_\_\_\_\_

### **For Office Use Only**

Signature of Customer and Mode of Operation of Account(s) verified : Yes \_\_\_\_\_ KYC Complaint : \_\_\_\_\_

Verified By  
Master Updated by  
Authorized by

Name of the Staff	Signature of the Staff

Receipt Date : \_\_\_\_\_

Approved

Time : \_\_\_\_\_

Branch Manager

### **ACKNOWLEDGEMENT**

Received ATM Application Form from Mr./Mrs./Miss \_\_\_\_\_ (SB/CA) A/c  
No. \_\_\_\_\_ Date : \_\_\_\_\_

Authorised Signatory

# JAIN CO-OPERATIVE BANK LIMITED.

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अहिंसा परमो धर्मः

Customer Request Form- RuPay Debit  SMS

Application No. :  Date :

Card No.

Branch  PAN Number

Name (as desired on the Card)

DOB :

Gender MALE  FEMALE

Statement on E-MAIL: Email ID :

SMS Alert Yes  No.

I confirm that I am the sole account holder or I have the required mandate enclosed from the joint account holder(s) to operate the account.

Mobile No.

Landline No.

Mailing / Permanent Address:

State  Pin Code

Primary A/c No

I have submitted all KYC documents to the Bank. I confirm that I am the sole account holder. I have the required mandate from the joint account holder (s) for ATM Operations.

Signature  Date  Place

-

“Signature and Mode Of Operations Confirmed” by Branch HEAD ONLY  Dated

**JAIN CO-OPERATIVE BANK LIMITED.**  
**REGD. ADDRESS: - 80, Daryaganj, New Delhi 110 003.**



**अहिंसा परमो धर्मः**

**MANDATE FOR ATM**

We the undersigned, Joint Account holder(s) hereby authorise Mr./Mrs./MS. \_\_\_\_\_ to operate the SB/CA Account no. \_\_\_\_\_ with Jain Co-Operative Bank Limited. \_\_\_\_\_ branch singly for ATM operations.

<b>Sr. No.</b>	<b>Name of the A/c holder</b>	<b>Signature</b>
1)		
2)		
3)		
4)		
5)		
6)		

**For Office Use Only**

Signature of Customer and Mode of Operation of Account(s) verified :

Yes \_\_\_\_\_

KYC Complaint : \_\_\_\_\_

	<b>Name of the Staff</b>	<b>Signature of the Staff</b>
Verified By		
Master Updated by		
Authorized by		

Receipt Date : \_\_\_\_\_

Approved

Time : \_\_\_\_\_

Branch Manager