VALMIKI URBAN CO-OP BANK LTD.PATHRI Mobile Banking Service Registration Form

	The Branch Manager													Date :											
Valmiki Urban Co-Op Bank Ltd.,Pathri												Sl. No.:													
Branch_					_																				
* I wish Urban Name of	Mol	oile	Bar	ıkin	g ".]	I su	bmi	t the	e in	forr	nati	on :	requ	irec	d fo	r t	he j	ourp	ose	as t	ınde	r:	lmik	ai	
(Surname) Email id:												First Name) (Middle Nam Date of Birth:												ne)	
											DD MM YY														
MMID Reg Mobile N							Nu	mb	er:																
Primary Account number																	S	ingl	e/Jo	int#	Acc	cou	nts		
Other Account Numbers												Single/Joint # Accounts								Add/ Delete					
																				-					
I have read the terms and conditions prescribed by the Bank for offering Mobile Banking Services to its customers and unconditionally accept them. I am also aware that Bank is entitled to modify the terms and conditions without any notice and posting them on the Bank's website would constitute Appropriate notice. I agree that the transactions executed while using Mobile Banking Services under my MMID and MPIN will be binding on me/ all the joint account holders.																									
Date: Signatur														re (re of the account holder(s)										
(* Pleas same as account	that	in	you	ır ac	cou	nt	at t	he I	3raı	nch.	Ac	cou	ints	wh	ich	ar	e c	pera	ted						
													JSE												
Verified the details of the account holder from the record and found correct. The applicant is permitted to subscribe to Mobile Banking Service offered by the Bank.																									
Date:																			A	uth	orize	ed O	ffici	ial	
Above custome		ls uj	ploa	ıded	for	en	abli	ng t	the	acc	oun	t(s)	for	Mo	obil	le]	Bar	ıking	g Se	ervio	ce re	eque	sted	by	the

Entry made by

Date:

Authorized Official