

# VALMIKI URBAN CO-OP. BANK LTD; PATHRI DIST. PARBHANI

(H.O. : Sai Road Pathri Dist.Parbhani 431506 )

## RUPAY DEBIT CARD APPLICATION FORM

(Please fill in block) (Please put(tick) in appropriate box)

To,  
The Branch Manager,  
Valmiki UrbanCo-Op Bank Ltd., Pathri  
Branch

Dear Sir,  
I/we wish to apply for the Rupay debit Card. The details are as under:

### PERSONAL INFORMATION

1) Name  
(as to be embossed on the card)

Name in,Full	Surname	First Name	Middle Name

### FINACIAL INFORMATION

2) Primary Account details(theSaving Bank or Current Account)

Type	Account Number	Balance	Joint Holder's Name/s (If Any)

### 3) DECLARATION

I/we declare the above information is correct. I/We have read and understood the terms and conditions of the ATM Card Schems as annexed to this application. I/We authorise the Bank to contact my/your employer or any source to obtain any further information that may be required. I/We hereby authorise the Bank to issue to me/us an ATM CARD as requested and debt my/our above mentioned primary account for all withdrawals to be using the card and also to recover the Bank's charges/fees as applicable from time. With out prejudice to above. I/We accept the Bank's lien on my/our all deposits, present and fulure Held in the above mentioned primary Account.

Authorised Signature/s

1.

2.

FOR USE THE ISSUING BRANCH

BRANCHAPPLICATION SR. NO.

The details mentioned in the application form are verified by us and the application is sanctioned and forwarded to ATM Card Cell,Pathri for issuance fo the Card.

Seal & Signature of Authorised Official

TO BE FILLIED IN BY ATM CARD CELL, PATHRI

1. Application Received on -

2. ATM Card No. -

Seal & Signature of Authorised Official ATM Card Cell