The Mansa Central Cooperative Bank Ltd.

APPLICATION FORM FOR ATM / DEBIT CARD FOR INDIVIDUALS

Please read instructions / Terms & Conditions (given overleaf) carefully before filling up the form

INSTRUCTIONS: (1) Please fill in the form in BLOCK LETTERS only. (2) Tick (✓) in appropriate column wherever required.

Card Issuing Branch Code ☐☐☐☐ Branch Name ____________

NAME AS DESIRED ON CARD (Maximum upto 20 characters, not nickname)

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1. Primary Account Details ☐ Saving ☐ Current # Mode of Operation: SOLE / Either or Survivor
   Account No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Customer ID ☐☐☐☐☐☐☐☐☐
2. Name of Applicant / Account Holder
   ☐ Mr. ☐ Mrs. ☐ Miss. First Name : ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
   Middle Name ☐☐☐☐☐☐☐☐☐☐☐☐☐ Last Name ☐☐☐☐☐☐☐☐☐☐☐☐☐
   Date of Birth ☐☐☐☐☐☐☐☐ (D D M M Y Y Y Y) Mother's Maiden name ____________
   Occupation ☐ Service ☐ Business ☐ Professional ☐ Student ☐ Self employed ☐ House wife ☐ Others
   E-mail ID ____________
3. *Other Details:
   Father/Husband Name: ____________ Nationality: ________ Religion: ________
   AADHAR No.: ☐☐☐☐☐☐☐☐☐☐☐☐ PAN NO.: ☐☐☐☐☐☐☐☐☐☐
4. *Residential Address
   ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
   ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
   City ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Pin ☐☐☐☐☐☐ State ☐
5. Office Business Address
   ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
   ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
   City ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Pin ☐☐☐☐☐☐ State ☐
6. Communication address OFFICE ☐ RESIDENCE ☐
   TEL NUMBER with STD Code: (R)esidence ________ (O)ffice ________ (M)obile ________
7. For Linking Secondary A/C's to the Primary card only
   ☐ Saving ☐ Current Account No. 1 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
   ☐ Saving ☐ Current Account No. 2 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
8. Signature of the Applicant ☐

   Name ____________

   Rupay Card Number (For Branch use)

   ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Please paste passport Size Colour Photograph here, Please do not use Pins, Staples or tape

9. Declaration :
   I/We, have read, understood and accepted the terms and conditions governing the use of Rupay Card herein given overleaf. I/We hereby agree to abide by the said terms and conditions as in force from time to time.

   (1) Signature of Applicant ____________ (2) Signature of Joint Account Holder (if any) ____________ (E/S)
   Name ____________ Name ____________

FOR BRANCH USE ONLY

Signature of customer and mode of Operation of the Account(s) varified , and hereby authorized to issue the Rupay Debit Card.

Signature of verifying Authority: ____________ Authorised Signatory : ____________

FOR ATM BACK OFFICE **Processed on** ☐☐☐☐☐☐☐☐ (D D M M Y Y Y Y)

APPLICATION NO.: ____________ **A/C Type: SB/CA (Tick) ATM CARD NO.-** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

BRANCH NAME: ____________ **A/C No.: (Pr.)** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Authorised By** ____________

* Please Attach Document Proofs

*In Current accounts ATM Cards will be issued to Sole properiters only