



# THE KARNAVATI CO.OP. BANK LTD.

## Application Form For ATM cum Debit Card

Branch Name :- \_\_\_\_\_ Date of Application

Name : ( Person to whom card is to be issued)

Mr. / Mrs. / Ms. \_\_\_\_\_

Date of Birth \_\_\_\_\_

Father's / Spouse Name \_\_\_\_\_

Name as Desired on the ATM cum Debit Card

In Block capital Letters (Maximum upto 18 characters)

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Address (O)

C	I	T	Y																									
P	I	N																										

Address (R)

C	I	T	Y																									
P	I	N																										

Tel. No. (R) \_\_\_\_\_

Tel. No. (O) \_\_\_\_\_

Mobile No. \_\_\_\_\_

Email ID. \_\_\_\_\_

**Details of Primary and Secondary account Number :-**

Type of A/c.	Account No.	Category of A/c.(SB,CD,OD)	Cust. I.D. No.	Branch Name
Primary				
Secondary				
Secondary				

**I would like receive my Card and PIN Mailer at :- ( Please Tick one Option)**

i) Residential Address

ii) Office Address

iii) Will collect personally from the Branch.

**For Additional Card :- (Person to Whom card is to be Issued)**

Mr. / Mrs. / Ms. \_\_\_\_\_

Date of Birth \_\_\_\_\_

Father's / Spouse Name \_\_\_\_\_

Name as Desired on the ATM cum Debit Card \_\_\_\_\_

In Block capital Letters (Maximum up to 18 characters)

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Tel. No. (R) \_\_\_\_\_

Tel. No. (O) \_\_\_\_\_

Mobile No. \_\_\_\_\_

Email ID. \_\_\_\_\_

[ ATM cum Debit Card is issued only for accounts where mode of operation is self / either or survivor / any one or survivor. It is not issued to trust accounts and other accounts except mention above.]

**DECLARATION / ATM CUM DEBIT CARD UNDERTAKING**

I/We have read and understood the Terms and Conditions governing the usage of The Karnavati Co. op. Bank Ltd. ATM cum Debit Card. I/We accept to be bound by the said terms and Conditions or to any changes made therein from time to time by the Bank at its sole discretion without notice to me/us. I/We Confirm that I/We are the sole account holder(s) or have the required mandate to operate all the accounts linked to the Debit card singly. I/We understand that at present this ATM cum Debit Card will work only as ATM Card only for cash withdrawal through ATM linked to my/our account. We understand that when bank will separately convey it will be enabled to act as Debit Card also. I/We accept full responsibility for the safe keeping of my/our Debit-cum-ATM card and secret PIN and agree not to make any claims against Bank in case of misuse of the Card and PIN due to my negligence.

I/We accept full responsibility for my/our ATM cum Debit Card and agree not to make any claims against The Karnavati Co. op Bank Ltd. In respect there to. I/We agree to provide any information from my/our account to The Karnavati Co.op Bank Ltd.

Date : \_\_\_\_\_ Signature of First Application : \_\_\_\_\_

Place : \_\_\_\_\_ Signature of Second Application : \_\_\_\_\_

# FOR BRANCH USE ONLY

Signature of Customer and Mode of Operation of the account(s) verified. The conduct of the account during the last six months is satisfactory / It is a New account. We hereby recommend issuing the ATM cum Debit Card.

Signature of the verifying Authority : \_\_\_\_\_

Name of the verifying Authority : \_\_\_\_\_

Branch : \_\_\_\_\_

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