



नालन्दा सेन्ट्रल को-ऑपरेटिव बैंक लि. NALANDA CENTRAL CO-OPERATIVE BANK LTD.

APPLICATION FOR RUPAY DEBIT CARD/RUPAY KISHAN CARD

To,

Branch Manager
Nalanda Central Coop. Bank Ltd.
Branch :-

Date :-

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Dear Sir/Madam

KINDLY ACCEPT MY REQUEST

Request for issuance of Rupay Debit/Rupay Kishan Card (Pl. Tick) :

Rupay Kishan Card Rupay Debit Card First
Applicant
PhotoSecond
Applicant
Photo

Name of Account Holder : _____

Name of Joint A/c Holder : _____

Customer Address : _____

City :-

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 Post :-

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District :-

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 State :-

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 Pin :-

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Date of Birth :-

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 Mobile No :-

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(*Mandatory field in case SMS alert not registered earlier, this no. to be enabled for SMS Alert),

Email ID :-

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Type of Card (Please Tick): (i) Personalized (ii) Non-Personalized

Details of Main and Linked Accounts:

Type of Account (Please Tick): (i) SB (ii) CA (iii) KCC (iv) CC Detail of Account Number :-

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Note :- The Main and Linked Accounts Should be in the same name capacity. The linked account can be used for Card Based transaction
Declaration:

- I agree to abled by the conditions related to ATM/ Debit Card as laid down by the Bank.
- I shall be using my ATM/Debit Card if I agree to them terms and conditions stipulated by the Bank for the same.
- I indemnify the Bank for all valid transaction undertaking through my ATM/Debit Card.
- I undertake to safeguard my ATM/Debit Card and not share my PIN with any body to ensure its safely.
- I undertake that all transaction undertaken through the ADD-ON ATM/Debit Card issued as per my request would be treated at per with transaction undertaken by me.
- The details furnished above are true to the best of my knowledge and belief.

Signature Name of
Account Holder

Signature Name of
Joint Account Holder

FOR OFFICE USE ONLY:

Details of Accounts and Signature of the account Holder's as given have been Verified & Card issues as per request