

Date:

## The Vishweshwar Sahakari Bank Ltd., Pune

Branch \_\_\_\_\_

		Appli	ication for av	ailing bank services						
1.	Name of the fire	n :								
	Constitution	: Proprieto	orship :	Partnership: Pvt. Ltd. Co.:						
		Public L	*	Others:						
		T done D	u., 00	Cindis.						
	Name of the Ap	plicant : Mr. /	Mrs							
			Surnam							
2.	Mailing Address	s :								
	Empil Address	City:	**************************************	PIN :						
	Email Address :  Mother's Full Maiden Name :									
	Date of Birth	:	D D	M M Y Y Y Y						
3.			lowing bank servi	ces of your bank						
	(Please tick appropriate box)									
	SMS t	anking servic	e	Tele banking service						
	Mobile	e banking serv	ice	Fax on demand service						
	Interne	et banking ser	vice	RTGS / NEFT fund transfer service						
4.	Details of the accounts to be linked with above service /s									
	Branch	Type of Account	Account No.	Name/s of the Authorised person/s for account operations						
		tri dia San		1.						
				2.						
	1			3.						
	Linked - Landl	ine Phone No	).	Mobile No.						
		Fax No		E-mail ID :						
5.	Documents Sub	mitted :		(alternate)						
	A Dec	laration		C Resolution						
	B Lett	er of Consent	/ Authority							
6.	sign herebelow from time to tim I agree that the I I hereby state the cancellation to I	in token of our le by the Bank Bank may deb lat should I w Bank in this re	r acceptance of the it the said account ish to cancel the egard. I hereby ag	itions relating to above services offered by your Bank. It is terms and conditions as in force & as may be amended for service charges as applicable from time to time. above services applied for, I shall duly issue a letter of tree that until ten days after receipt of such cancellation and for shall hold good.						
Di	ant.									
Plac Date				Signature of the Applicant						
For Sign	office use :	m in order.		nd is as per our records. The required document/s are						

**Branch Seal** 

Authorised official

## A) <u>Declaration</u>

## **DECLARATION**

We, the undersig											
		Sahakari							of		
									ili e		
hereby declare that we services applied for, we it from time to time.	accept an	d agree to be	bound by	those term:	s and cond	itions a	nd any c	changes m	ade to		
We agree that the	Bank may	y debit the sa	id account	for service	charges as	applica	ıble fron	1 time to t	ime.		
		1.					2.				
		3.					4.				
Place : Date:				Signatures of all joint account holders/joint authorised signatories							
We, the undersigned (or signatories for our According signatories are -  1)	ount No		w			- V II-	Branc	h in the na	ame of		
3)			No. 1911	- 3	- A						
hereby expressly give of applied for herewith on We have no objection from our behalf.	our joint co	f.	4E8	7.7							
We hereby confirm that applied for and we agre We hereby state that she revocation to Bank in the the consent/authorisation. The signature of Applic	e to be borould we whis regard n as above	und by those vish to revok l. We hereby e stated shall	terms & co e the above agree that hold good.	onditions. consent/au until ten d	uthorisation ays after r	n, we sl eceipt o	nall duly of such r	issue a le	etter of		
					Your	s faithf	ully,				
			1.					2.			
			3.					4.			
Signatu Applicant acc		er	Signatures of consenting / authorising account holders.								