Bank of Maharashtra



'Lokmangal', 1501, Shivaji Nagar, Pune - 411005

Application for Internet Banking, Mobile Banking and Phone Banking (Retail)

(All fields with (*) are mandatory)

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Bank of N	Discourt.																																						
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I/We wish to apply for Internet Banking, Phone Banking, and Mobile Banking as under:																																							
Name of the Applicant(*)									<i>,,</i>		Τ		<u> </u>	T		T	T						T	T					T	T			Τ		T	\exists			Т
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Name of User																																				П			П
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Mailing Address(*)					*)																																		
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City(*) Phone Number							\vdash				\vdash			-		+	+		M	hil	e Nu	ımł	her	+	9	1	<u> </u>		1111		Je	. T				ᆛ	귀		_
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Date of Birth(*)					*)	Place of Birth(*)																																	
						(DD/MM/YYYY)																																	
Mother's Maiden Name(*)																																							
Delivery Channel(*)						☐ Internet Banking ☐ Mobile Banking ☐ Phone Banking																																	
						☐ View ☐ Offline Requests ☐ e-Payments of Taxes ☐ Funds Transfer (Own Accounts)																																	
Facilities Requested				ed	☐ Funds Transfer (Third Party - Intra Bank) ☐ Funds Transfer (Third Party - Inter Bank)																																		
						☐ All facilities																																	
Account	De	tails																																					
Sr No Account Numbe						er							Branch Name &						Mode of				(CIF Number															
	Account Numbe						-							Code							Operation					(For office use only)													
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2.								<u> </u>	\bot	1	<u> </u>	\downarrow									Sin					_	-						_			ran			
3.									lacksquare	╀	-	\downarrow									Sin				Customer above.														
	4. 5.					 				+							Single/Joint Single/Joint					2. CIF you are putting above must belong to your branch.																	
6.										-	+	+						Single/Joint					3. Update Internet Banking flag for the CIF in B@ncs24																
7.											+	+									Single/Joint					4. Link other accounts to the CIF													
8.											+	+	+								Single/Joint					written above (If Required) 5. Check the address mentioned in													
9.									\dagger	+	\dagger	+									Sin	_				application with the address available in B@ncs24, Both													
10.							\vdash	+	+	+	+	+			Single/Joint addresses must																								

Declaration:

I affirm, confirm and undertake that I/We have read and understood the Terms and conditions for usage of the Internet Banking, Phone banking and Mobile Banking services offered by Bank of Maharashtra and I am aware of charges applicable as set forth in www.bankofmaharashtra.in, and that I agree on my own behalf, or as the mandate holder on behalf of the joint account holders and will adhere to all terms and conditions of opening/applying/availing/maintaining/operating (as applicable) for usage of Internet Banking, Phone Banking and Mobile Banking of Bank of Maharashtra may be in force from time to time.

I declare that all particulars and information given in this application form (and all documents referred or provided there with) are true, correct, complete and up-to-date in all respects and I and other joint account holders have not withheld any information. I understand that certain particulars given by me or required by the operational guideline governing banking companies. I agree and undertake to provide any further information that Bank of Maharashtra may require.

I agree and understand that Bank of Maharashtra reserves the right to reject any application without providing any reason. I agree and understand that Bank of Maharashtra reserves the right to retain the application form and the documents provided therewith and will not return the same to me.

Date:		
Place:		Signature of Applicant
Letter of mandate for Internet, Mobile and	d Phone Banking (Applica	ble for Joint Accounts only)
To, In-Charge, Internet Banking Cell, Bank of Maharashtra,		
Dear Sir/ Madam, I/We		
I/We	(s) of account number(s) $_$ $_$	
to access/ view the said account(s) for and on	(Name of the App my/our behalf.	olicant)
		he Terms and conditions for usage of the Internet Banking, ra as displayed on the website <u>www.bankofmaharashtra.ir</u>
	n this regard. I/We hereby	n, I/We shall duly issue a letter of revocation to In-Charge, agree that until ten days after receipt of such revocation
Yours faithfully,		
1. Name:		Signature
2. Name:		Signature
For office use only (Branch)		
		customer and mode of operation of the account/s is/are opening the account. The application is sanctioned and
Date:	Branch Seal	Signature of Branch Manager/ Authorised Official Signature Code No:
	_	5.5s.s. 6 5546 Hot

(Name & Designation)