

The Manager,

## Surat National Co-op. Bank Ltd.



**સુરત નેશનલ કો. ઓ. બેલ્ક લિ.** વહિવટી કરોરી : ૯/૬૦, "સપ્તશૃંગી" બીજો માળ, કોટસફીલ મેઈન રોડ, સુરત. ફોન : ૨૪૧૧૩૪૬, ૨૪૫૨૩૬७, ફેક્સ : ૨૪૪૨૧૪૮ મુખ્ય કરોરી : ૩/૪૦૧૬, "નવનિધિ" નવાપુરા, કરવા રોડ, સુરત-૩૯૫૦૦૩. ફોન : ૨૪૨૪૧૨૫, ૨૪૧૫૪૧૨, ૨૪૯૧૧૯७, ૨૪૯૧૦७૧

## **APPLICATION FORM FOR MOBILE BANKING SERVICES**

			B	Branc	ch, S	URA	AT.	FOR BANK'S USE ONLY											
I/We	apply for Mol	oile B	Banki	ng S	ervic	e of	your	ban	k for	whic	h I/W	e submit following details :	Customer ID :						
Mob	ile Phone Nur	nber/	'Nam	ies o	n wh	ich N	Mobil	le Ba	ınkinç	g Sei	rvice	required :		Date	of Birt	h of	A/c I	nold	ler :
Furt	her, I request t	to linl	k up	my/c	our fo	llowi	ng a	ccou	ınts f	or the	e ser	ices:		D D	М	M \	/ Y	Y	Y
Sr. No.	Type of A/c.						A/c.	. No				Name of A/c.	Branch	Signature					



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Sr. No.	Type of A/c.	A/c. No.										Name of A/c.	Branch	Signature			
I/We	/We agree to abide by all rules & regulations of the scheme & as may be framed from time to time by the bank.																
the ba	: Declaration:  I understand that the Mobile service offered by the bank uses the network provided by Mobile Phone service provider and I agree to hold the bank harmless against any loss incurred to me due to failure of this service, I/We have read the terms and conditions given above and bound my self/ourselves for the same. I/We further declare that the information furnished are correct to the best of my / our knowledge.																
Date:20												,		ature ( As per Bank's Record )			
OFFICE USE ONLY								Signa	ture	of A	/c. h	older verified by :	Registration D	Registration Done by :			
												Officer	Officer / Clerk				