

## SURAT NATIONAL CO-OP BANK LTD.

| To,                              |   |                       |          |  |
|----------------------------------|---|-----------------------|----------|--|
| The Branch Manager,              |   |                       |          |  |
| Surat National Co. Op. Bank Ltd. |   |                       |          |  |
| Branch                           |   |                       |          |  |
|                                  |   |                       |          |  |
|                                  |   |                       |          |  |
| l                                | Customer Information : CID NO. :            |                       |          |  |
|                                  | Name of the Custoemer:                      |                       |          |  |
|                                  | Account No. :                               |                       |          |  |
|                                  | ATM Card No. :                              |                       |          |  |
| 2                                | ATM Information :                           |                       |          |  |
|                                  |   |                       |          |  |
|                                  | ATM ID / Location, If ID is not available : |                       |          |  |
|                                  | Name of the ATM & Bank                      |                       |          |  |
|                                  | Hamo of the Arm & Bank                      |                       |          |  |
| 3                                | Natutre of the Complaints                   |                       |          |  |
|                                  | a) Complaint relating to Cash withdrawal    |                       |          |  |
|                                  | a) Complaint relating to Cash withdrawar    |                       |          |  |
|                                  | Amount requested for withdrawal :           | [Rs.                  | 1        |  |
|                                  | Amount actually disbursed at ATM :          | [Rs.                  | ]        |  |
|                                  | Amount to the account debited :             | [Rs.                  | 1        |  |
|                                  | Date of transaction :                       | ]                     | 1        |  |
|                                  | Time of transaction :                       | [                     | 1        |  |
|                                  | h) Other Complaint                          |                       |          |  |
|                                  | b) Other Complaint                          |                       |          |  |
|                                  |   |                       |          |  |
|                                  |   |                       |          |  |
| Date :                           |   |                       |          |  |
| X                                |   |                       |          |  |
| Contact Tel/mobile No.           |   | Signature of the Care | 1 Holder |  |

Bank Use Only