

TO

THE VELLORE DISTRICT CENTRAL CO-OPERATIVE BANK LTD.,

DATE :

3, Anna Salai, (Officers line), Vellore – 632 001.
Phone :- (0416) 2220 522, 722 & 524
Fax: 0416 - 2222634 E-Mail: velccb.00@gmail.com

MOBILE BANKING APPLICATION FORM

The Manager The Vellore District Cent	ral Coop Bank Ltd			
	y for availing the Mobile			he Vellore District Central Cooperative Bank Ltd., be enabled.
	Customer Details	(quio seu dons		magazin pangapatika datah promot 4 oran pangir undi 6 run - 1966 a naberi tang di naberi 1966 di milang datah s
CIF No.	AG			dStrill galan managas.
Customer Name	ROTATES CHARGE AND BOTH ON AND SECTION OF THE SECTI			
Customer Address	enguar a saream a sarea a last a la sarea a last a	materilique des m		DA BONNO ABROCH THE COMMON DISTANCE OF THE COMMON OF THE C
Mobile Number			y what	
SMS Alert Req.				
Primary Account Number		Account Ty	rpe	Single / Joint / Either or Survivor
Email Address				
PARAMETER AV 100				Oeclaration :

Declaration:-

I hereby confirm that the following:-

- > I/We have read and agree to abide by the terms and conditions governing Mobile Banking Services which is appended below.
- > I am the sole account holder or I have the required mandate for joint account to singly operate the account through Mobile Banking.
- > I am solely responsible for all the transactions happening through my mobile number.
- I will keep the application User ID/Password and M-Pin any other form of security/ authentication OTP provided by the Bank and maintain the confidentiality and secrecy. I am aware and agree that Mobile Banking are offered based on my primary CIF and all the accounts linked or linked in future with primary CIF, will be available for transactions under Mobile Banking.
- In case of change in mobile number, I will uninstall /remove the mobile banking application installed in my mobile, for maintaining the confidentiality and secrecy.
- > In case of lost/theft of my Mobile / SIM, I will immediately inform the bank to cease/ suspend the mobile application facility.
- I will maintain minimum balance stipulated and agree to pay the charges applicable for this service and hereby authorize VCC Bank Ltd., to debit my account(s) towards any service charges if any, as and when it is applicable.
- > I declare that the above details mentioned in the application are true and correct to the best of my knowledge.

Name of the Account Holder	Signature of the Account Holder			
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LETTER OF MANDATE FOR JOINT | E or S ACCOUNTS

The same	> I/We hereby agree to the terms and conditions specified by the Bank for Mobile Banking which is appended below					
Santage of the last	➤ I/We authorise the account holder Mr./Ms./Mrs for operating the above mentioned account(s) through Mobile Banking services offered by VCC Bank.					
	I/We undertake to ratify and confirm all and whatever Mr./Ms					
	This authority shall continue to be in force, until I/any one of us revoke this mandate by a notice in writing delivered to you.					
	Name of the Account Holder(s)	Signature of the Account Holder				
1.		The Vellore District Central Goop Bank Little Branch				
2.	red by the volters District Coursel Cooperative Bank Di	office was to each for palific to Mobile Senior Screek wife				
3.		And the transfer of the control of t				
(For Branch use only)						
	Branch DATE:					
	BRANCH VERIFICATION AND CONFIRMATION AMERICAN AM					
1.	Whether account Number(s), Name/Address in the application mentioned/applied are matched with KYC already obtained?					
2.	Whether the mobile number provided in CBS and this application form matches?					
3.	Whether applicant signature is verified?					
4.	Whether letter of mandate for joint account operation is obtained?					
5.	Mobile number not linked to any other CIF for Mobile Banking					
De	eclaration :	Email Address				
I hereby certify that all the above information has been verified, updated are correct. The Mobile Banking Services can be enabled for the applicant.						
Ent	tered by(Maker Sign):	Verified by(Checker Sign):				
Emp ID: 11 td between 9TO notes threshold by 12 to 12		Emp ID: 10m makes to state out-declared to second and the confidentiality and second				
	BILLION WAS BEILDER ACTED TO STORED BUSINESS IN	all the accounts taken or threed in future with primary College.				
Date of dispatch of Application to Head Office:						
(For Head Office use only)						
Name of the Account Politics of the American State of the Company of the American Politics of th						
Dat	e of application received:	Variable Ry Charles Step)				
Use	er details entered by:					
Che	ecked and processed by:					