



THE ADARSH CO-OPERATIVE URBAN BANK LTD.,

H.O : 1-251/1, MPR Complex, Phase - 1, IDA, Jeedimetla, Hyderabad - 500 055, Rangareddy Dist., A.P.

BRANCH NAME :

BRANCH CODE :

DD MM YYYY

RUPAY ATM CARD APPLICATION FORM

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I would like to link my following ADARSH BANK SB/CA/OD/SOD account to my Rupay ATM Card

Primary A/c Number : Customer ID Number : other A/c Number:.....

Full Name : Age:..... Date of Birth :

Father/Husband Name:..... PAN No.....

Name as desired on the card : (Maximum 18 Characters)

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Present Address :

..... Pin.....

Phone No. : e-mail..... Mobile No.....

Permanent Address :

..... Pin.....

Phone No. : e-mail..... Mobile No.....

DECLARATION / RUPAY CARD UNDERTAKING

I/We have read and understood the terms and conditions governing the usage of the Rupay card. I/we accept to be bound by the said terms and conditions and to any changes made therein from time to time by the Bank, at its sole discretion without any notice to me/us. I/We confirm that I/We are the sole account holder(s) to operate all the account linked to the Rupay Card(s) singly and that I/We have completed 18 years of age. I/We understand that upon issue of a Rupay Card to me/us, the existing ATM Card linked to my/out accounts will be deactivated. I/We understand and undertake that the usage of a Rupay Card shall be strictly in accordance with the Rules and Regulations and the amendments thereof stipulated by the Reserve Bank of India.

Passport size
Photograph

I/We accept full responsibility for my/our Rupay Card and agree not to make any claims against ADARSH BANK, in respect thereof, Apart from this, the current Schedule of Charges has been received by me and I agree with the same.

Signature of the Applicant
(Please sign in BLACK)
Name :

For Office Use only

Verified Branch Code : Verified Branch Name : Verified Customer ID :

Verified Signature : Verified Photo : Charges Debited :

Signature of the Verifying Officer : Approval of the

Name of the Verifying Officer : Manager for Issue of Card :

Rupay Card Number : Valid upto :

Acknowledgement of Receipt of the Card :
(Signature of the card holder) (Date)

Issuing Officer's Signature.....PIN Generation completed by:.....
(Signature) (Date)