



# Jhalawar Kendriya Sahkari Bank Ltd.

(H.O. SAHKAR BHAWAN JHALAWAR, N.H-12, JHALRAPATAN-326023)

Branch MICR No. \_\_\_\_\_

Serial Number \_\_\_\_\_

## ATM CRAD APPLICATION FROM

(Please fill in the Block letter)

To,  
The Branch Manager,  
The JKSB Ltd. \_\_\_\_\_ Branch.

Dear Sir,

I /we wish to apply for the ATM (Automated Teller Machine) Card. The details are as under.

## PERSONAL INFORMATION

### 1) NAME:

Account Holder Name*	
Father's Name	
Mother's Name *	
Spouse Name	

### 1) \* DATE OF BIRTH:

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### 2) \*ADDRESS (please put (x) in the box below indicating your choice of address to which correspondence is to be send)

RESIDENCE ADDRESS	OFFICE ADDRESS
PIN	PIN
TEL:	TEL:
MOBILE	MOBILE

## FINANCIAL INFORMATION

### 3) \*PRIMARY/SECONDARY ACCOUNT DETAILS (The saving bank of current account) For ATM card

Type	Account Type/No.	Balance	Joint Holder's Name(if any)

### 4) PAN NO.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

### 5) \*DOCUMENT FOR POSITIVE IDENTIFICATION (Passport/ driving license/identity card/voter id- card etc.)

Sr. No	Issued By	No	Date of issue	Date of Expiry

\*Mandatory

## 7) DECLARATION:

I/we declare that the above information is correct. I/We have read and understood the terms and conditions of the ATM Card facilities as annexed to this application. I/We authorize the Bank to contact my/our employer or any source to obtain any further information that may be required. I/We hereby authorize the bank to issue to me/us an ATM Card as requested and debit my/our above-mentioned Primary account for all withdrawals by me/us using the card and also to recover the Bank's charges/fees as applicable from time to time. Without prejudice to above, I/We accept the Bank's lien on my/our all deposits, present and future, held in the above-mentioned Primary Account.

### AUTHORIZED SPECIMEN SIGNATURES

Sr. No	A/C HOLDER NAME	SIGNATURE
1		
2		
3		

Customer details verified by: \_\_\_\_\_

### FOR USE OF THE ISSUING BRANCH

Branch Application Sr. No \_\_\_\_\_

The details mentioned in the application form are verified by us and the application is sanctioned and forwarded to ATM Card Cell, Jaipur, for issuance of the Card.

Signature of Branch Manager.      Seal of the Branch      Name and Designation      Date  
Signature Code No.

### TO BE FILLED IN BY ATM CARD ISSUING AUTHORITY

1. APPLICATION RECEIVED ON:----/----/----- (DD/MM/YYYY)
2. ATM Card No.....
3. Date of Issue: -----/-----/----- (DD/MM/YYYY)

Signature of Authorized Official ATM Card Issuing Branch.