

**Application Form for the  
RuPay Card/ Mobile Banking**



**VAISHYA SAHAKARI  
BANK LTD., MUMBAI**

To

The Manager, \_\_\_\_\_ Branch,

I wish to apply for the following facilities of Vaishya Sahakari Bank Ltd., Mumbai.

RuPay Card :  Mobile Banking :

My Personal Details are as given below:

Full Name :

Name to be embossed on Debit Card (20 Characters only):

Address :

City :  Pincode :

Tel(Res.):  Tel (office) :  Fax :

Mobile No. :  Email :

Date of Birth :           Date of Anniversary :

Mother's Maiden Name :

Reason for applying Card : \_\_\_\_\_

**For RuPay Card :**

(Service available for Individual / Joint Account Holders / Sole Proprietorship only)

Customer's ATM Card No. for surrender

Branch : \_\_\_\_\_ SB / CD A/c No.

MICR Code of Bank / Branch

The said account will be linked to RUPay Card

(Existing ATM Card will be deactivated after 45 days from the date of issuance of the RuPay Card)

Additional A/cs to be linked with RuPay Card (for use in Vaishya Sahakari Bank ATM's only)

Branch : \_\_\_\_\_ SB / CD A/c No.

Branch : \_\_\_\_\_ SB / CD A/c No.

**For Mobile Banking**

(Service available for Individual / Joint Account Holders / Sole Proprietorship only)

Mobile No. as mentioned above.

Declaration:

I have read and accepted the "Terms and conditions" displayed on [www.vaishyabank.com](http://www.vaishyabank.com) which can be amended from time to time regarding the use of  RuPay Card and  Services of Mobile Banking. I accept and agree to be bound by the said "Terms and Conditions" limiting the Bank's liability. I understand that the Bank may, at the absolute discretion, discontinue any of the service completely or partially without any notice to me. I agree that the Bank may debit my account for service charges as applicable for time to time. I understand that all the operations effected through use of  RuPay Card  Mobile Banking are binding on me.

-----  
**SIGNATURE OF THE ACCOUNT HOLDER**

Date :

**For Office use only**

Signature of the above account holder is verified and is as per the records. Mode of operation verified. KYC complied.

All above accounts & mobile no. are linked to Customer No. :

Recommended to issue RuPay Card (In case of joint account holders a separate mandate is to be obtained from other account holders).



# VAISHYA SAHAKARI BANK LTD., MUMBAI

(APPLICABLE FOR JOINT ACCOUNTS)

To,

**VAISHYA SAHAKARI BANK LTD., MUMBAI.**

Branch Manager, \_\_\_\_\_ Branch

SIR / MADAM,

I/We, (Names of all account holders)

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_ the undersigned,

Authorize (Name of the account holder) \_\_\_\_\_

to use the RuPay ATM Card / Mobile Banking Facility on the for and on my/our behalf.

I/We affirm, confirm and undertaken that I/We have read and understood the "Terms and Conditions" for usage of the RuPay ATM Card / Mobile Banking Service of Vaishya Sahakari Bank Ltd. Mumbai as displayed on the **Website : [www.vaishyabank.com](http://www.vaishyabank.com)** in and as amended from time to time and that I/We agree to abide by them.

I/We hereby state that, should I/We wish to revoke the above authorization, I/We shall duly issue a letter of revocation ("the revocation letter") to Vaishya Sahakari Bank Ltd., Mumbai in this regard. I/We hereby agree that until ten days after receipt of such revocation letter, the authorization as aforestated shall hold good.

Yours faithfully,

Name:

Name:

Signature: \_\_\_\_\_  
(Second holder)

Signature: \_\_\_\_\_  
(Third holder)

---

**For Office use only**

Signature of the above account holder is verified and is/are as per the records.

All above accounts are linked to Customer No. :

Mode of operation verified. KYC complied.

(Name and signature of the Branch Official)

With his/her employee code:

Branch Seal/Stamp: