

WARDHAMAN URBAN CO-OPERATIVE BANK LTD.

Head Office : 73-C, Sewa Sadan Chowk, Central Avenue, Nagpur- 440018 Ph : 0712-2778347, 2725535, 2735270, 2725522

INTERNET BANKING APPLICATION FORM (RETAIL/CORPORATE)

To, The Branch Manager Branch									
I/We wish to register as a user of Wardhaman Urban Co-op Bank's Internet Banking Service.									
Surn	Surname		ne	Middle Name					
Name/Title of the Company/ Partnership/Sole Proprietorship: (For Company / Partnership / Proprietorship only)									
Mailing Address									
E_mail Address :									
E_man Address	•								
Phone No. : Mobile No									
PAN/TAN No. (if any)									
Aadhar Card No.:									
Date of Birth (D	D/MM/YYYY):	(F	(For Retail Customer only)						
Mother's Maiden Name : (For Retail Customer only)									
Accounts to be linked to Internet Banking (For Retail Customers)									
Nature of Bank Account	Accour	nt Number	Branch	Customer ID (for official use only)					

<u>Declaration</u>: (for both Retail & Corporate):

opened with

Mandate / Indemnity:

account(s)

I/We affirm, confirm and undertake that I/We have read, understood and I/We agree to abide by the provisions contained in the Terms & Conditions, Privacy Policy and disclaimer displayed on Bank's Website www.wardhamanbank.com for usage of WUCB Internet Banking services and accept them. I/We declare that all the transactions executed over WUCB Internet Banking under my/our Username and Password will be binding on me/us. I/We declare that all the particulars and information given in this application form are true, correct and complete and upto date in all respects.

I/We agree and understand that Wardhaman Urban Co-op Bank Ltd. reserves the right to reject my/our application without assigning any reason. The Bank reserves the right to retain the application forms, the documents provided therewith including photographs, and will not return the same to me/us. Necessary resolution/Authorization is enclosed. [Declaration to be submitted in the case of partnership firms on the requisite paper and copy of resolution is to be submitted in the case of limited Companies on the letter head duly signed by the authorized Official of the company along-with seal].

Wardhaman Urban Co-operative

(the

with

Bank

Ltd.

along

I/we the undersigned, am/are the joint account holder(s) of Bank Account No.

				rst holder). I/We ne of the first holder)		
for and on my/our bel	nalf.	,	,	,	,	
I/We do hereby indem against any and all cla of non-compliance of a	ims, actions, penalti	ies that may	y be made, s	uffered or incurred by		
Signature of Custo (For Sa Signat (For Proprietor/)		Name & 1) 2) 3) 4) 5)	Signature of Partner	cs / Directors		
Place :			Date :			
We confirm having v Ltd. Internet Bankir Corporate seeking N Branch Name :	ng facilities recomn et Banking facility	For Use a ares and nonded. Conclosed.	at Branch nandates. V		Co-operative Bank ation on paper for	
Date:						
For Head Office Use IT Department	User ID Created of User ID Verified of			Signatu Signatu	ıre :	
Remarks if any:						