

THE INCOME TAX DEPT. CO-OP. BANK LTD.

AAYAKAR BHAVAN, MAHARSHI KARVE MARG, MUMBAI - 400020.

	A	pplication	on for A	TM Card
Name (in block letters) (only one name to be furn	nished) Mr. / Ms. / D	Or.		
Address / Telephone	F	Residence		Office
House / Company Name				
Door No. / Street				
Area				
City / District / State				
Pin Code				
Telephone				
E-mail ID				
Cell No.				
Account Details :	SB CD	□ cc	A/c. No.	
Operation Details :	SELF E-OF	R-S		
Edu. Qualifications :	☐ Graduate ☐ P.G.	☐ Diplor	ma Oth	ners
Occupation :	Student Retire	ed Service	ce Bus	siness Professional Others
Marital Status :	Single Marri	ed Widow	wed Dive	rorced
Sex :	☐ Male ☐ Fema	ale		
Mailing Address :	Residence Office	Э		Nationality :
Customer Type :	Resident Non-	resident		Date of Birth :
PAN No. :	-			Spouse Name :
Aadhar Card No. :				Spouse DOB :
Passport No. :			-	Wedding Day :
Monthly Income :	Rs.			• /
Card Requested for :	. 10.			
	IC Dools as sent	Card No.	T	
New / Replacement	IF Replacement	Reasons		
pf the ATMs installed are binding to the terms / conditions and also	ng on me / us. I/We have r so agree to abide by any a	read the terms a mendments sti	and conditions pulated by the	that all operations effected through this ATM card at any s governing the use of ABB / ATM card facility and agree Bank form time to time. holders are to sign the applications)
For BRANCH USE				
Charges, wherever applical in case of replacement card	ble, recovered : Rs. d, we confirm			Application Ref. No. :
Retrieval and destruction	of old card (When card	l is damaged)		
Obtbntion of declaration /	undertaking form appli	cant		
Card has been hotlisted i	n the systems			
Withdrawal Limit recommer			☐ Rs. 5,0	
Withdrawal Limit recommer	nded, without verificatio	n of balance	□ ns. 1,0	
Roll No. of the application,	in case of staff :			Application processed & ATM Card may be issue
Date				Chief Executive Officer
Customer No.:				
Card No.:				
				Entered by Approved by