MARANGATTUPILLY SERVICE CO-OPERATIVE BANK LTD. NO. 3556
MARANGATTUPILLY P.O. KOTTAYAM - 686 635

APPLICATION FOR INTER BRANCH TRANSACTION & ATM FACILITY

Photo

1. Name of the A/c. Holder (1) .....
   (2) .....
2. Permanent Address .....
   .....
   .....
3. Membership No. ..... A/c. No. [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

   ..... Specimen signature ..... Specimen signature ..... Specimen signature
4. Contact Ph. No. Mob: ..... Email: .....
5. Date of Birth : [ ][ ][ ][ ][ ][ ][ ][ ] Age [ ] Sex: M F
6. If ATM facility required Yes No
7. Give PAN No./Aadhar No./ ....
   Election ID No. .....
8. Mode of Operation (1) Single ☐ (2) E/S ☐ (3) F/S ☐
   (4) L/S ☐ (5) B/S ☐ (6) ..... (please specify)
9. Instruction Regarding renewal :
   (1) Credit interest to SB A/c. No. [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]
   (2) Fixed deposit renewal with interest/without interest
10. Name and Address of the Nominee : .....
    .....
    .....
    Relation ..... Age .....
11.. Introducer Name and address with : .....
    A/c. No. or Member No. .....
    Signature .....
    [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

DECLARATION

1. I/We ..... having the above account/s with The Marangattupilly Service Co-operative Bank Ltd. No. 3556, here by agree that I/We shall be bound by the Bank's rules & regulations and the other common rules in this regard, for the time being in force.
2. The Bank has agreed to provide me Inter Branch Transitions (IBT) Facility enabling withdrawal/remittance and both to my accounts from any of the Branch of the Bank and very much aware of the complex technologies involved in this facility and I shall not make the Bank responsible for any failure to provide IBT and ATM Service due to technical reasons.

Date: Signature of the customer

.....

For Office Use

ATM / IBT Enabled [ ] (Date & Time)

Customer ID alloted [ ] Manager