

# State Bank of Patiala

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## ATM CUM DEBIT CARD APPLICATION FORM

## State Bank CASH PLUS

*Thank you for applying for the State Bank ATM Card. To help us process your request quickly please fill this form as per the instructions overleaf if you have any questions, please check with your Branch Manager. We are committed to making your life simpler with the State Bank ATM CARD.*

New	Renewal	Replacement	Application No:

Name	
Name as you would like it on the card (max. 25 Letters (including spaces))	

Address for correspondence	
Town / City	
State	Pin
Telephone	2 <sup>nd</sup> Telephone/Mobile

My designated account/s on which I require ATM services

Primary Account

Savings	Current	Overdraft	KCC			Male	Female
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Savings A/C No.	Overdraft A/C No.
Current A/C No	K C C A/C No.

**DECLARATION:** I am aware of the Terms and Conditions governing the use of the ATM Card and agree to abide by them.  
The bank may call me at my residence / office in connection with my ATM transactions.

Remarks \_\_\_\_\_ Applicant's Signature \_\_\_\_\_  
 Place: \_\_\_\_\_  
 Date: \_\_\_\_\_

### IMPORTANT INSTRUCTIONS

- ❖ Please fill the entire form in CAPITAL LETTERS only
- ❖ Leave one box space between each word.
- ❖ Do not write outside the provided boxes
- ❖ Complete all sections.
- ❖ Sign the declaration.
- ❖ If joint A/c please fill another application form.
- ❖ Joint A/c to be either or survivor / anyone or survivor.
- ❖ Ensure the application is attested by your Branch Manager.

### For Bank Use

New	Renewal	Replacement	Date

ATM Branch Code		Branch Manager's Signature & Branch Stamp
Customer / Link Branch Code		
Issue Card Yes / No		
Daily Limit Rs.		

Old ATM Card No.	
New ATM Card No.	

Old ATM card to be mentioned for a replacement or renewal of the card