THE VAISH COOPERATIVE NEW BANK LTD.

APPLICATION FORM FOR RUPAY DEBIT CARD

(TO BE FILLED IN BLOCK LETTERS ONLY)

Affix Passport Size Photograph of Applicant

The Branch Head
The Vaish Cooperative New Bank Ltd.
_____Branch

DATE : __ __ / __ __ / __ __ __ __

Dear Sir/Madam,
I would like to apply for Rupay Debit Card in the Account No._____ in the name/s of

	Name	Cust. ID
1 NAME OF 1st A/C HOLDER		
2 NAME OF 2nd A/C HOLDER		

* (Please attach separate sheet in case of more account holders)

NEW	YES / NO	RE-ISSUANCE	YES / NO
A/C HOLDER	YES / NO	ADD ON- CARDHOLDER	YES / NO
PERSONALISED		NON-PERSONALISED	

Add-on cardholder's Relationship with Account Holder _____

Details of Card Holder:-

NAME ON CARD	
ADDRESS WITH PIN	
A/C NO. (12 DIGITS)	
A/C TYPE	SAVING A/C ☐ CURRENT A/C ☐
DATE OF BIRTH	/ /
PAN	
EMAIL ID	
MOBILE NO. *	

(* Mandatory field. In case SMS Alert not registered earlier, this no. to be enabled for SMS Alert.)

Terms and Conditions:-

1. I agree to abide by the terms and conditions related to Rupay Classic Debit Card as laid down by the Bank in the Bank's website at www.vcnb.co.in.
2. I shall be using my Rupay Classic Debit Card only if I agree to the terms and conditions stipulated by the Bank from time to time for the same.
3. I indemnify the Bank for all valid transactions undertaken through my Rupay Classic Debit Card.
4. I undertake to safeguard my Rupay Classic Debit Card and not share my PIN/ OTP with anybody to ensure its safety.
5. I undertake that all transactions undertaken through the ADD-ON Rupay Classic Debit Card issued as per my request would be treated at par with transactions undertaken by me.
6. The details furnished above are true to the best of my knowledge and belief.

_____ Sign. of 1st Account holder

_____ Sign. of 2nd Account holder

_____ Signature of Add-on Cardholder

FOR OFFICE USE ONLY -

Details of accounts and signatures of the account holder(s) as given above have been verified & Card issued as per request.

TYPE OF CARD (Please tick): (I) PERSONALIZED ☐ (II) NON-PERSONALIZED ☐

1. Signature of Officer

2. Signature of Branch Head