

SERVICE REQUEST FORM

FROM (Name) _____ DATE: _____

ACCOUNT NO. _____ MOBILE NO _____

To :The Branch Head, _____ Branch

I/we are maintaining the above account with your branch & request you to offer services as requested below. I/we agree with the terms & conditions/rules for governing the captioned account.

PLEASE TICK

1. Issue _____ No. of CHEQUE BOOK(s) with 25 leaves 50 leaves
*(You can also order chequebook by SENDING **CHKBK** to 9223009999 or thru **Netbanking** or on **BCB ATM**)*
2. ADD MODIFY DELETE email ID _____
(You can also ADD email id by SENDING your email id to 9223009999)
3. Issue Duplicate Pass Book / Statement from Date _____ to Date _____
4. ADD MODIFY DELETE Mobile No. _____
5. Register for STATEMENT BY EMAIL Daily Stmt Weekly Monthly Quarterly Yearly Stmt
*(You can also SEND **STMT D** or **STMT W** or **STMT Q** or **STMT Y** to 9223009999 to register for 'statement of a/c by email' facility)*
6. Register Mobile No. _____ for SMS Alerts eStatement Mobile Bkg
7. Issue DUPLICATE PIN: Debit Card Net Banking Mobile Banking
8. Issue Duplicate Card Block Card Unblock Card : Card No. is _____
*(You can also send **BLOCK** to 9223009999 to **BLOCK** your card)*
9. Issue of DUPLICATE FIXED DEPOSIT receipt: FD Receipt No. _____
10. Credit DIVIDEND of Membership No. _____ to A/c No. _____
11. Issue DUPLICATE SHARE certificate: Cert no _____ Mem No. _____
12. ADD / MODIFY AADHAAR Card No. _____ PAN _____
13. Transfer Rs. _____ from A/C No. _____ to A/C No. _____
on _____ Date of Week/Month/Quarter.
14. Stop payment of Chq No. _____ to _____ Dated _____ Reason _____
15. Add the name(s)* _____
as Joint holder(s) & Change the Mode of Operation to _____
16. ADD MODIFY NOMINEE _____ Relation: _____

PLEASE TICK

18. Change of NAME* from _____ Reason: _____

NEW NAME _____

19. DELETION of Jt. Holder(s)* _____

20. Change of MODE OF OPERATION to _____

21. Change ADDRESS* _____

22. Cancel Pay Order / Demand Draft No. _____ dtd _____ for Rs. _____ issued in the name of _____ for reason _____

23. Update Signatures against our A/c no.* _____

24. Convert account from MINOR TO MAJOR. Change Mode of Operation to* _____

25. Part Closure FD/ Close Account No.: _____ Amount _____ Reason _____

Pay Cash Issue PO/DD Transfer to account no _____ IFSC _____

PLEASE STRIKE OUT REQUESTS THAT ARE NOT APPLICABLE & TICK THE APPLICABLE REQUEST(S)

I / We the undersigned declare that the above information is correct and hereby further authorise you to debit my / our above accounts towards the necessary fees / charges, if any.

SIGN OF A/C HOLDER 1

SIGN OF A/C HOLDER 2

SIGN OF A/C HOLDER 3

SIGN OF A/C HOLDER 4

*** PLEASE ATTACH DOCUMENTS FOR UNDERMENTIONED REQUESTS**

DUPLICATE FD RECEIPT	Indemnity bond.
ADDITION OF NAME AS JOINT HOLDER	Three PP size photo, Officially valid proof of Identity (PAN) & Proof of Address and Customer Details Form. FATCA/CRS Declaration Form must be submitted by NRIs.
CHANGE OF NAME	Marriage Certificate (where applicable) / Copy of Gazette Certificate.
DELETION OF NAME	Death Certificate (where applicable)
ACCOUNT CLOSURE	Passbook, Cheque Book, Debit Card
CHANGE OF ADDRESS	Officially valid Address proof (Aadhaar/Voter-ID/Driving License/Passport/NREGA card/NPR)

FOR BRANCH USE ONLY

Form contents checked, Account details & signatures verified and data updated in Computer Systems

Entered By: Staff No, Sign & Date

Verified by: Staff No. Signature of the Verifier & Date

BANK REMARKS: