



# The Bhiwani Central Cooperative Bank Ltd.

## Application for availing MOBILE BANKING Services

[Please read the terms & conditions carefully before filling up this form]

The Head of the Branch  
The Bhiwani Central Cooperative Bank Ltd.  
\_\_\_\_\_  
(Branch)  
\_\_\_\_\_  
(City)

Dear Sir,

I/We wish to subscribe to the **Mobile Banking facility** offered by the Bank for my/our following Account for which the mode of operation of the account is **Single** ☐ **Either or Survivor** ☐ **Anyone or Survivor** ☐  
I/we confirm that for the accounts mentioned below, none of the account holder/s is a minor.

### Declaration

CUSTOMER ID\*:   
ACCOUNT NO\*:   
NAME OF ACCOUNT HOLDER:   
DATE OF BIRTH:    EMAIL ID:   
ADDRESS   
CITY:  STATE:   
PIN CODE:   
MOBILE NUMBER:

### Declaration

I/we affirm, confirm and undertake that I/we have read and understood the Terms and conditions for usage of the Mobile Banking service of The Bhiwani Central Cooperative Bank Ltd as set forth in [www.cbbhiwani.in](http://www.cbbhiwani.in) and that I/we agree to all the terms/conditions of applying/availing/maintaining operating (as applicable) for usage of Mobile Banking service of The Bhiwani Central Cooperative Bank Ltd as may be in force from time to time. I/we further authorize The Bhiwani Central Cooperative Bank Ltd to debit my/ our account/s towards any applicable charges for mobile banking service, payable currently or in future.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of the customer)

### FOR BRANCH USE

It is confirmed that:

- The information provided by the applicant is verified and found correct.
- The Mobile banking registration process has been completed as per request.
- Mobile Banking facility is flagged positive in the Account Master for all accounts opted for by the applicant.

Branch Manager

Accountant/Jr Accountant