



THE TIRUCHIRAPALLI DISTRICT CENTRAL CO-OP. BANK LTD.,

Head Office / Branch

(for Bank Use only)

DATE :

Account Number

Customer ID No.

Member No.

1st Applicant

2nd Applicant

3rd Applicant

APPLICATION FORM FOR ACCOUNT OPENING

I / We request you to open an account with you for which I / We Initially deposit ₹
(in words)

<input type="checkbox"/> Current Account	<input type="checkbox"/> Savings Bank Account	<input type="checkbox"/> with cheque facility	<input type="checkbox"/> No Frill Account	<input type="checkbox"/> Other A/c
		<input type="checkbox"/> without cheque facility	ATM Card <input type="checkbox"/> YES <input type="checkbox"/> NO	

CUSTOMER'S TYPE

- Individual
 Individual - Staff
 Minor
 Individual Senior Citizen
 HUF
 Institutions
 Minor
 Private Ltd
 Public Ltd
 Govt Organisation
 Co-op Society
 SHG
 Partnership Firm

Name of Customer (s)

Date of Birth

PAN

Sex

1st Applicant					M	F
2nd Applicant					M	F
3rd Applicant					M	F

Father / Husband / Guardian Name :

Relationship with 1st applicant

Community

1st Applicant						OC	BC	MBC	SC	ST
2nd Applicant						OC	BC	MBC	SC	ST
3rd Applicant						OC	BC	MBC	SC	ST

Please paste a passport size photo

1st applicant

Please paste a passport size photo

2nd applicant

Please paste a passport size photo

3rd applicant

Specimen Signature

	1st applicant	2nd applicant	3rd applicant
1			
2			



THE TIRUCHIRAPALLI DISTRICT CENTRAL CO-OP. BANK LTD.,

Address for Communication

1st Applicant										
	TALUK			DISTRICT				PIN		
	MOBILE				LANDLINE			E-mail		

2nd Applicant										
	TALUK			DISTRICT				PIN		
	MOBILE				LANDLINE			E-mail		

3rd Applicant										
	TALUK			DISTRICT				PIN		
	MOBILE				LANDLINE			E-mail		

Mode of Operation

- Self Only
 Either or Survivor
 Former or Survivor
 Any one or Survivor
 Jointly
 ARS
 Others

KYC IDENTIFICATION DOCUMENTS TO BE SUBMITTED BY APPLICANT(S)		
(Any one documents from each of the following two lists subjects to Bank's satisfaction)		
LIST 1 Proof of Identity	LIST 2 Proof of Address	
1	Passport	1
2	PAN Card	2
3	Voter's Identity Card	3
4	Driving Licence	4
5	identity card issued by the Govt / Public Authority / (Reputed institutions subject to satisfaction of bank)	5
6	Letter from employer-subject to Satisfaction of Bank	6
7	AADHAAR / UIDAI CARD	7
		8

Details of KYC documents submitted by the applicants

	IDENTITY PROOF			ADDRESS PROOF		
	1st Applicant	2nd Applicant	3rd Applicant	1st Applicant	2nd Applicant	3rd Applicant
Type of Document						
Document Number						
Issuing Authority						
Date of Issue						
Place of Issue						
Vaild Upto						

THE TIRUCHIRAPALLI DISTRICT CENTRAL CO-OP. BANK LTD.,

- * I / We hereby declare that the rules governing the Deposits Account have been read by me/us and that I/We agree to be bounded by the rules and by-laws of the Bank in force now.
- * I / We hereby declare that the Amount deposited in the account are of my/our own.
- * I / We declare that the account will be operated upon and the balance will be payable to myself/Either or Survivor/Anyone or depositors against joint discharge.
- * I / We hereby undertake the minimum balance of ₹.....in the account as and also agree to maintain the minimum balance as modified by the bank from time to time.
- * I / We also agree that the bank has got every right to close the account for non-maintenance of minimum balance and if cheques are issued by me/us without providing adequate funds.
- * I / We do agree to the condition that the rate of interest payable by the Bank on my/our Deposit Account shall be subject to the charges in the interest rates made by the Reserve Bank of India / Trichy District Central Co-operative Bank from time to time.
- * I / We do agree that the clause repayable to either or Survivor/any one or more survivors(s) includes the right to the survivors(s) to apply before the date of maturity for repayment or for credit facilities against the security to the deposit. I / We further agree that any one of us can renew deposit in the same names
- * I / We do agree that, the rate of interest payable by the bank on my/our deposit for overdue period, if unrenewed on the due date shall be subject to the rules of the bank prevailing at the time or renewal.
- * Please send / do not send due date notice to my / our address.
- * I / We shall be liable to you for any monies owing to you from time to time in case the account is over drawn and / debit balance is caused including your commission interest and other incidental charges.
- * In the event of death or insolvency or withdrawal of any of us the survivor/s shall have full control of any monies standing to my / our credit in our account with you and the survivor/s will have full powers to operate the account / close the account
- * For Current Account (Individuals only) *At present I / We do not enjoy any credit facility with any Banks / Branch I / We undertake to inform you as when credit facilities are availed by me/us with other bank (s) Branch (es) of your Bank,
* At present, I am/we are having account with the following other Bank(s) Branch(es) and enjoying credit facilities.
(*strike out which is not applicable)

Name of the Bank / Branch	Name of the Facility	Limit Sanctioned	Balance Outstanding	Securities

Signature of the 1st Applicant
Signature of the 2nd Applicant
Signature of the 3rd Applicant

If Minor Account Holder
Name of the Parent / Guardian

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Relationship with Minor

Father
 Mother
 By Court Order (Enclose a copy)

SIGNATURE OF THE PARENT / GUARDIAN

Introducer Details

Having CIF No.

I.....confirm that I am holder of..... account No:
.....of The Trichy District Central Co-operative Bank Ltd, for the past.....
months / years and personally know the applicant(s)
for more than.....months / years and confirm his / her / their identity and address as stated above.

In person verification carried out by identity verification done

Date :

 Signature of Introducer

Branch Manager
(Verified the Introducer's Signature)

APPLICANT DECLARATION

I hereby declared that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately, in case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we aware that I/we may be held liable for it.
I would like to share my personal / KYC details with Central KYC Registry.

Place : _____ Signature / Stamp of Applicant

Date : _____

Attestation / For Office use only		
Letter of thanks sent to Introducer / customer on	Account opened by Name Section Asst. Signature	Authorised by Name Signature of the Branch Manager
Risk Classification <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High Reason for risk classification made.....		



THE TIRUCHIRAPALLI DISTRICT CENTRAL CO-OP. BANK LTD.,

Head Office /Branch

Customer ID No.

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CUSTOMER PROFILE (To be obtained for each applicant separately)

Marital Statuses <input type="checkbox"/> Married <input type="checkbox"/> Single	Dependants <input type="checkbox"/> Spouse <input type="checkbox"/> Parents <input type="checkbox"/> No. of Children
Religion <input type="checkbox"/> Hindu <input type="checkbox"/> Muslim <input type="checkbox"/> Christian Others Please specify	
Education <input type="checkbox"/> School Level <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Doctorate <input type="checkbox"/> Professional <input type="checkbox"/> Other	
Occupation <input type="checkbox"/> Salaried <input type="checkbox"/> Self Employed <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> House Wife	
<input type="checkbox"/> Student <input type="checkbox"/> Co-op. Department Others Please specify	
If Salaried Name of Organisation & Designation <table border="1" style="width: 100%; height: 20px;"></table>	
If Self Employed - Nature of Business <input type="checkbox"/> Trading <input type="checkbox"/> Manufacturing <input type="checkbox"/> Services <input type="checkbox"/> Agriculture <input type="checkbox"/> Real Estate	
<table border="1" style="width: 100%; height: 20px;"></table> Blood Group Others Please specify	
If Self Employed Professional <input type="checkbox"/> CA <input type="checkbox"/> Doctor <input type="checkbox"/> Lawyer <input type="checkbox"/> Stock Broker <input type="checkbox"/> Consultant <input type="checkbox"/> Engineer	

MONTHLY HOUSE HOLD INCOME :

<input type="checkbox"/> 20,000	<input type="checkbox"/> 20,000-50,000	<input type="checkbox"/> 50,000-1,00,000	<input type="checkbox"/> 1,00,000-1,50,000	<input type="checkbox"/> 1,50,001-2,00,000
<input type="checkbox"/> 20,001-3,00,000	<input type="checkbox"/> 3,00,001-5,00,000	<input type="checkbox"/> 5,00,001-10,00,000	<input type="checkbox"/> Above 10,00,000	

ANNUAL TURN OVER :

ASSET OWNERSHIP

VEHICLE <input type="checkbox"/> Two Wheeler <input type="checkbox"/> Car <input type="checkbox"/> Self Owned <input type="checkbox"/> Company Car
RESIDENCE <input type="checkbox"/> Self <input type="checkbox"/> Company Provided <input type="checkbox"/> Rented <input type="checkbox"/> Purchased on Loan

PREFERRED INVESTMENT

<input type="checkbox"/> Bank Deposit <input type="checkbox"/> Mutual Funds <input type="checkbox"/> Shares <input type="checkbox"/> Company Deposit <input type="checkbox"/> Real Estate <input type="checkbox"/> Gold <input type="checkbox"/> PPF
<input type="checkbox"/> Properties <input type="checkbox"/> Insurance <input type="checkbox"/> Others

LOANS

Loans Availed During 3 years Car Housing Durables Against Deposits Business Gold Others

INSURANS

Life Yes No Mediclaim Yes No

INTERNET ACCESS Office Home Not Applicable

SPOUSE DETAILS

Name											Occupation	
Edu. Qualification						Date of Birth				Anniversary Date		
Mobile No.						Tel No.				Email		

BANKING ACTIVITIES

Account with other TDCC Branches <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes Account No. and Name of Branch <table border="1" style="width: 100%; height: 20px;"></table>
Account with other Banks <input type="checkbox"/> Nationalised <input type="checkbox"/> Private Sector <input type="checkbox"/> Co-operative <input type="checkbox"/> Foreign
Name of the Bank and Type of Account <table border="1" style="width: 100%; height: 20px;"></table>

Preferred Music <input type="checkbox"/> Vocal <input type="checkbox"/> Indian <input type="checkbox"/> Pop <input type="checkbox"/> Remix <input type="checkbox"/> Ghazals <input type="checkbox"/> Western
<input type="checkbox"/> Traditional <input type="checkbox"/> Religious <input type="checkbox"/> Instruments
Preferred Movies <input type="checkbox"/> Tamil <input type="checkbox"/> Hindi <input type="checkbox"/> English <input type="checkbox"/> World Movies
Food <input type="checkbox"/> Veg. <input type="checkbox"/> Non Veg.

Favourite News Paper	<table border="1" style="width: 100%; height: 20px;"></table>
Favourite Magazine	<table border="1" style="width: 100%; height: 20px;"></table>

Signature of Applicant

THE TIRUCHIRAPALLI DISTRICT CENTRAL CO-OP. BANK LTD.,

FORM NO.60

Form of declaration to be filed by a person who does not have a permanent Account Number or General Index Register Number and who makes payment in cash in respect of transaction in specified in clauses (a) of (h) rule 114B.

1. Full Name and Address of the declarant
2. Particulars of transaction.....
3. Amount of transaction.....
4. Are you assessed to Tax? yes / No.....
5. If yes,
 - i) Details of ward / Circle / Range where the last return of income was filed?
 - ii) Reasons for not having permanent account number?
6. Details of the document being produced in support of address in column (1)

Verification

I,.....do hereby declare that what is stated above is true to the best of my knowledge and belief verified today, the.....day of.....

Date :.....

Place :.....

Signature of the declarant

FORM NO.61 of Income Tax Rules. 1962

Form of Declaration to be filed by a person who has agricultural income and is not in receipt of any other income chargeable to income tax in respect of transactions specified in clauses (a) to (h) or rule 1 14B.

1. Full Name and Address of the declarant
2. Particulars of transaction.....Opening if.....A/c
3. Details of the document being produced in support of address in column (1)

I hereby declare that my source of income is from agriculture and I am not required to pay income tax on any other income if any.

Date :.....

Place :.....

Signature of the declarant

Verification

I,.....do hereby declare that what is stated above is true to the best of my knowledge and belief verified today, the.....day of.....

Date :.....

Place :.....

Signature of the declarant

Instructions : Documents which can be produced in support of the address are :-

- (a) Ration Card
- (b) Passport
- (c) Driving Licence
- (d) Identify card by any institution,
- (e) Any document or communication issued by any authority of central Government, State Government or local bodies showing residential address.
- (f) Any other documentary evidence in support of his address given on the declaration.

THE TIRUCHIRAPALLI DISTRICT CENTRAL CO-OP. BANK LTD.,

FORM DA-1 Nomination Form

Nomination under section 45ZA to 45ZF of the Banking Regulation Act 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of Bank deposits.

I/We names(s) and address(es) nominate the following persons to whom in the event of my / our / minor's death the amount of the deposit particulars whereof are given below, may be returned by the Tiruchirapalli District Central Co-op Bank Ltd Branch.

Name and Address of the Nominee	Nominee's Relationship with the Depositor	Age	If nominee is a minor his / her Date of Birth

As the nominee is a minor on this date, I/We appoint Thir/Tmt.....

(Name and address, Age & Relationship with depositor, if any) to receive the amount of the deposit claim amount on behalf of the nominee in the event of my / our minor's death during the minority of the nominee

Signature.....

Serial Number in the nomination Register	
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Signature of the Branch Manager
(Please affix office Seal)



THE TIRUCHIRAPALLI DISTRICT CENTRAL CO-OP. BANK LTD., Acknowledgement for form DA1 Nomination Form

Received on.....nomination form No. DA-1 for making nomination from.....
Date

.....in respect of.....
(Name of Deposit Holders) (Name of the Account)

Deposit Account No.
Serial Number in the nomination Register
Date :

Signature of the Branch Manager
(Please affix office seal)

APPLICATION FOR SMS ALERTS

From : Date :
..... CIF :
..... A/C.No. :
..... Mobile No:

To

The Manager / Chief Manager
The Tiruchirapalli District Central Co-operative Bank Ltd.,
..... Branch / Head office

Dear Sir,

Sub : Request for providing SMS Alert - Reg.



I am holding the above account with your Bank. I underst and that SMS alert facility is available in your Bank. So I request you to enable the SMS alerts for my account and the alerts may be sent to my above mentioned mobile.

yours faithfully

Signature

Name :

FOR BANK USE

The mobile number is incorporated in the CIF details and the SMS alerts request in enable in the miscellaneous details of the deposit account details.

Date :

Manager / Chief Manager

Note :

Customer is informed that SMS alert is an add-on facility and enable at their own / request and can be withdraw without assigning any reason. The alerts will be sent when the account is debited / credited with specified amount set by the Bank. The bank cannot be held liable at any circumstance for any harm, damages, loss that may be caused due to this facility, if any discrepancy is found it should be brought to the notice of the Branch Manager. Inform the Bank if any changes in the mobile number immediately. Non receipt of alert should not be claimed as a matter or right.





THE TIRUCHIRAPALLI DISTRICT CENTRAL CO-OP. BANK LTD.,

Head Office /Branch

APPLICATION FOR Rupay EMV Debit / KCC CARD



Dear sir,

Please issue me a Rup ay EMV Debit / KCC Card against my savings Bank / Current

A/c. No.....maintained with your branch as detailed below:

Personal Details

Name :	Father / Husband's Name :
Occupation :	DOB :
Office Address:	Residence Address :
PIN :	PIN :
Tel.No.(O) :	Tel.No.(R)
Mobile No. :	PAN :
Email id :	
Aadhaar No. :	

Account Details

Account Type	Account No.
Savings Bank A/c.	
Current Account / KCC	

I declare that the information on given above is correct. I have read the terms and conditions governing the use of Rupay EMV / Debit / KCC Card facility and agree to comply with and be bound by the same and changes that may be made therein time to time. I under take to adhere to RBI and other regulations, issued from time to time while using the card the above account(s) is/are held by me individually / jointly with Mr. / Mrs. / Ms

I request you to issue Rupay EMV Debit / KCC Card in my favour against my saving bank / Current account No

Date :

Encl : KYC Proof of Address and Identification

Signature of the applicant

Authorisation from the joint Account Holders

I/We hereby authorize TDCC Bank to issue Rupay EMV Debit/KCC Card to Mr./Mrs./Ms..... against our savings bank/Current Account No.....with you. All transactions arising from the use of the said card shall be binding on me/us, jointly and severally.

For Bank's Use

Signature of the applicant

Card Number	
Date of issue to Customer	
KYC Compliance	Complied / Not Complied

Date :

Branch Manager.

The terms and conditions governing the facility of Rupay EMV Debit / KCC Card are appended for the guidance of the applicant.





TERMS AND CONDITIONS

1. DEFINITION

- 1.1 Rupay EMV Debit / KCC Card shall mean the card issued by TDCC Bank (herein after referred to as "Bank" and its successors and assigns) to the account holder for effecting banking transactions through "Automated Teller Machine" (ATM, "Cash Dispenser" (CD) and "Point of Sale" (POS) Terminal"/E.com installed / to be installed by the Bank from time to time.
- 1.2 Account refers to the Account holder's savings / current account or any other type of accounts so designated by the Bank to eligible account(s) for operations through the use of Rupay EMV Debit KCC Card
- 1.3 'Card Holder' means the account holder issued with Rupay EMV debit card by the Bank with personal identification number.

2. THE CARD

- 2.1 The card is Bank's property and should be returned at the request of the Bank or its agent.
- 2.2 The card shall be used only by the card holder and it is not transferable.
- 2.3 The card holder shall take all necessary precautions to ensure safety of the Card.

3. THE PIN

- 3.1 Rupay EMV debit card will be issued with a unique 4 digit personal identification number. The card holder is advised to change the PIN to any other four digit number of his/her choice.
- 3.2 The card holder shall not inform/dilose to any person of the identification number (PIN) at any point of time and under any circumstances whether, voluntarily or otherwise. The card holder shall not keep any written record of his PIN in any place or manner which may enable a third party to use the ATM Card.
- 3.3 Changing of PIN, revision of card limit, change of host branch or replacement of card, etc., shall not be construed as commencement of a new contract.

4. LOSS OF CARD

- 4.1 If the card is lost or stolen, the card holder must immediately notify the branch form where he/she has obtained the card. If this notification is given orally, it must be confirmed in writing within 24 hours. After the Bank has been properly notified of any loss, the principal card holder will given the Bank all the information in his or her possession as to the circumstances of loss and take all reasonable steps to assist the Bank to recover the missing card.
- 4.2 Any instruction to STOP OPERATION of Rupay EMV Debit / KCC Card facility due to loss / theft / surrender or any other reason shall be made in writing and will become operative at ATMs/POS/E.com only from the time such instruction are received and carried out.
- 4.3 The card holder shall indemnify the Bank for all the loss or damages caused to the Bank by any unauthorised use of card/PIN. The bank shall not be held liable for any loss due to misuse of the card.
- 4.4 Replacements / renewals of the Rupay EMV Debit / KCC Card shall be subject to the terms and conditions in respect of the use of the Debit / KCC Card.

5. DEBIT TO CUSTOMER'S ACCOUNT

- 5.1 The Bank shall debit the card holder's account with the amount of any withdrawal made in ATMs/CDs and Purchase of goods at POS / available of services at merchant establishment in India in a accordance with the bank's records of transaction. The cardholder shall maintain funds to meet such transactions.
- 5.2 The card of the Bank for transactions put though by use of Rupay EMV / Debit / KCC Card shall be conclusive and binding for all purposes.
- 5.3 The charges considered reasonable and determined by the Bank from time to time shall be recovered from / debited to cardholder's account. The charges comprise the amount of any purchase of goods and / or services and any amount chargeable to the card account by vitue of a transaction instruction. The card holder is bound by his / her transactions and the applicable charges. If any, by use of our debit cards in ATMs/POS terminal / E.com. In case of doubt ful / unsuccessful transactions, necessary classifications will be obtained from the member Bank.
- 5.4 The card holder should agree to acknowledge all the transactions initiated by him/her to debit his / her account as per Bank's record of transactions.
- 5.5 The card holder should agree to acknowledge and hold the Bank indemnified for all transactions fees, costs and any other charges out standing in the account at any time.

6. TRANSACTION

- 6.1 The card holder shall be fully responsible for all transactions put through by use of this card with or without his / her knowledge / authority.

Signature of the Account holder

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7. SERVICES

- 7.1 The Bank shall not be liable for any failure to provide any service or to perform any obligation under this facility and for any consequential effects where such failure is due to any malfunction of the ATM / CD / POS/ E.Com Communication lines or other equipment(s) related to this service, due to any reason including temporary insufficiency of cash in the ATM, other circumstances beyond its control etc., or any of the pos who do not transact business against the card for what soever reason bank shall not be responsible or liable in any manner for any deficiency in service by any service provider.
- 7.2 ATM services can be availed from other Bank ATMs free of Charge
Upto 3 transaction per month (including non financial transactions) in METRO centre ATMs and
Upto 5 transaction per month (including non financial transactions) in non-METRO centre ATMs
For transactions exceeding free transactions, following charges will be collected
Financial transaction at 20/- per transaction (inclusive of taxes) and
Non-Financial transaction at 10/- per transaction (inclusive of taxes) and
These charges may vary from time to time as per RBI directive.
- 7.3 The Bank reserves the right to introduce new facilities or remove existing facilities as and when warranted without assigning any reason for the same. However, card holder will be duly advised.
- 7.4 Cash withdrawal limit of the card holders :
Card holders can withdraw minimum of Rs.100/- and maximum of Rs.20,000/- per day
Card withdrawal from our Bank's ATM is restricted to Rs.10,000/- per transaction and Rs.20,000/- per day.
Card withdrawal from other Bank's ATM is restricted to Rs.10,000/- per transaction and Rs.20,000/- per day.
The withdrawal limit will be varied at the discretion of the Bank from time to time

8. CARD HOLDER

- 8.1 The entire outstanding on account of withdrawals through ATM / POS / E.Com shall become immediately due and payable is full, on the Bank rupay of the cardholder (subject to limitations imposed by statute) or on the death of the cardholder or at the Bank's discretion if there is any breach of condition by the card holder.
- 8.2 The card holder authorizes the Bank and / or its duly authorized agents to recover the dues form any of the accounts of the card holder with the Bank or with any other Bank or Institution.
- 8.3 The card holder is aware of Bank's rules, regulations and guidelines that govern card usage. The guideliness issued by the Bank should be strictly followed.
- 8.4 The Bank may disclose, in strict confidence to any other institution such information concerning the card holder's account as may be necessary or appropriate.
- 8.5 The card holder should undertake to indemnify the Bank for all loss or damage caused to the Bank by the unauthorised use of the card or related PIN by the add-on cardholder or any other person.
- 8.6 Operations by the use of card shall be subject to the Act of law governing the A/c.
- 8.7 The cardholder should note that if the card is used after the expiry date of the card, it will either be retained or rejected by the ATM.
- 8.8 A person having Rupay EMV Debit card / KCC facility shall be deemed to have read, understood and agreed to be bound by the terms and conditions for the time being in force.
- 8.9 Cardholder desirous of termination of the use of the Ru Pay EMV Debit Card / KCC shall give the Bank not less than 15 days prior notice in writing and surrencher the card forth with to the Bank. He / She shall be allowed to closs the designated account only after expiry of the notice period.
- 8.10 The card holder shall take appropriate precautions while transacting with the card. Bank shall not be responsible or liable for any loss for any inappropriate use of the card.

9. GENERAL

- 9.1 An account in the name of a minor or an account in which minor is a joint account holder is not eligible to be an account for the purpose of issue of Debit Card.
- 9.2 The Bank reserves the right to withdraw / cancel the card at any time without prior notice to the card holder.
- 9.3 Than powers and authorisation conferred on the Bank are irrevocable.

10. BANK

- 10.1 The Bank reserves to it self the right to delete or add or alter these terms and conditions at any time without giving a specific and sep arate notice to debit cardholders. An announcement of the change in the terms and conditions displayed on the notice board to the branch or given in the press by the Bank of published in the website of the bank will be considered as sufficient notice.
- 10.2 The Bank is entitle to add, alter or amend the rules as it thinks fit including limiting the account / amount of withdrawal or timing of the service in its absolute discretion without assigning any reasons whatsoever and the same shall be binding on the card holder.
- 10.3 Bank reserves to it the right to withdraw the facility at any point of time. The card holder shall surrender the card to the Bank for cancellation of the Bank withdraws the facility. The reason for withdrawal shall not be questioned by the card holder. The decision taken by the Bank for with drawing the card shall be final.



திருச்சிராப்பள்ளி மாவட்ட மத்தியக் கூட்டுறவு வங்கி **கிணையில் உள் வங்கிக் கணக்குடன் ஆதார் எண்னை இணைப்பதற்கான மற்றும் நேரடி மானியப் பணிகளை வங்கிக் கணக்கில் பெறுவதற்கான விண்ணப்பம் - (என்ரிசிஐ மேப்ஸ் - NPCI Mapping)**

கிணை பெயர் : தேதி :

கிணை :

அறிவித்த நபர், நேரடிப் பணிகளைப் பெறுவதற்காக என்ரிசிஐ மேப்ஸில் ஆதார் எண்னை இணைத்தல்

திருச்சிராப்பள்ளி மாவட்ட மத்தியக் கூட்டுறவு வங்கி கிணையில் உள் வங்கி / நடப்பு / No Fri / PMJDY / SB KCC கணக்கு எண்..... இல் நேரடிப் பணிகளைப் பெறுவதற்காக என்ரிசிஐ மேப்ஸில் ஆதார் எண்னை இணைக்க எனது ஒப்புதல் கடிதத்தை சமர்ப்பிக்கிறேன்.

நான் எனது ஆதார் எண்னைச் சமர்ப்பிப்பதோடு நான் தன்னிச்சையாக கீழே உள்ளவற்றுக்கு என் ஒப்புதலை அளிக்கிறேன்.

- எனது தகவல்களை உறுதிப்படுத்து யுஜிஏஐ (UIDAI)-மூலம் எனது ஆதார் விவரங்களைப் பயன்படுத்துவதற்கும்
- எனக்கு குறுஞ்செய்தி எச்சரிக்கைகளை அனுப்புவதற்கு கீழே குறிப்பிட்டுள்ள எனது மொபைல் எண்னைப் பயன்படுத்துவதற்கும்.
- உங்கள் வங்கியில் நான் வைத்துள்ள தற்போதைய/ புதிய / எதிர்கால கணக்குகள் மற்றும் வாடிக்கையாளர் கமிஸிவரத்தீர்வு (சிஐஎம்-சிஐ) ஆதார் எண்னை இணைப்பதற்கும் எனது ஒப்புதலை அளிக்கிறேன்.

எனது ஆதார் எண் :

எனது பெயர் - ஆதார் அட்டையில் உள்ளவாறு

(வாடிக்கையாளர் கையொப்பம் / பெருவிரல் ரேகை)

நேரடி மானியப் பணிகளைப் பெறுவதற்கான விருப்பத்தீர்வு (ஒன்றை டிக் செய்யவும்)

- நான் எனது வங்கிக் கணக்கு எண்.....ஐ என்ரிசிஐ மேப்ஸ் உடன் இணைத்து அதன் மூலம் இந்திய அரசாங்கத்திடமிருந்து (LPG) சமையல் விவாயு மானியம் உள்ளிட்ட நேரடி மானியப் பணிக் மரிமற்றத்தை (DBT) பெறக்கூட எனது கணக்கில் பெற விருப்புகிறேன். நான் ஒன்றுக்கு மேற்பட்ட மானியப் பணிகளைப் பெறுவதற்காக இருந்தால், அனைத்து மானியப் பணிகளையும் இதே கணக்கில் பெறுவேன் என்பதை நான் புரிந்துகொள்கிறேன். (என்ரிசிஐ மேப்ஸ் உடன் வங்கிக் உணக்கை இதுவரை இணைத்திராத வாடிக்கையாளருக்கு)
- நான் ஏற்கனவே ஐடிஎன் எண், 508680 கொண்ட திருச்சிராப்பள்ளி மாவட்ட மத்தியக் கூட்டுறவு வங்கியில் கணக்கு வைத்திருக்கிறேன். மேலும் திருந்திய அரசாங்கத்திடமிருந்து நேரடி மானியப் பணிகளைப் பெறுவதற்காக அந்தக் கணக்கை என்ரிசிஐ மேப்ஸ் உடன் இணைத்துள்ளேன். எனது என்ரிசிஐ மேப்ஸ்கை (நேரடி மானியப் பணிக் கணக்கு) உங்கள் வங்கியில் நான் வைத்துள்ள கணக்குக்கு மாற்றுவாறு உங்களைக் கேட்டுக்கொள்கிறேன்.
- நான் ஏற்கனவே ஐடிஎன் எண்..... கொண்ட (வங்கியின் பெயர்) வேறொரு வங்கியில் ஒரு கணக்கு வைத்திருக்கிறேன். மேலும் திருந்திய அரசாங்கத்திடமிருந்து நேரடி மானியப் பணிகளைப் பெறுவதற்காக அந்தக் கணக்கை என்ரிசிஐ மேப்ஸ் உடன் இணைத்துள்ளேன். நான் எனது என்ரிசிஐ மேப்ஸ்கை (நேரடி மானியப் பணிக் கணக்கு) தற்போதுள்ள வங்கியிலிருந்து மாற்ற விருப்பமில்லை.
- நான் உங்கள் வங்கியிலுள்ள எனது கணக்குகளை என்ரிசிஐ மேப்ஸ் உடன் இணைக்க விருப்பமில்லை (நான் நேரடி மானியப் பணிக் பெறமாட்டேன்).
- தகவல் உறுதிப்படுத்துவதற்கு பகிர்ப்பரும் தகவல்களின் தன்மை பற்றி எனக்கு விசேஷிக் கூறப்பட்டுள்ளது. இத்துடன் வங்கியில் சமர்ப்பிக்கப்படும் எனது தகவல்கள் மேலே குறிப்பிட்டதைத் தவிர வேறு எந்த நேக்கத்திற்காகவும் அல்லது சட்டத்தின் தேவைகளின்படி பயன்படுத்தப்பட மாட்டாது என்ற விவரம் எனக்குத் தெளிவாகத் தெரிவிக்கப்பட்டுள்ளது.

மேல்குறிப்பிட்டுள்ள எண்ணால் அளிக்கப்பட்ட மேலேயுள்ள தகவல்கள் அனைத்தும் உண்மையானவை, சரியானவை மற்றும் முழுமையானவை என இதன் மூலம் நான் உறுதியளிக்கிறேன்.

இணைப்பு எனது ஆதார் நகல் தங்கள் உண்மையுள்ள

(வாடிக்கையாளர் கையொப்பம் / பெருவிரல் ரேகை)

பெயர் :

மின்னஞ்சல் :

மொபைல் எண் :

- என்ரிசிஐ மேப்ஸ் : மேப்ஸ் எனது ஒரு வங்கியை ஆதார் எண்ணுடன் தொடர்புபடுத்தும் செயல்முறை ஆகும். இது நேரடி மானியப் பணிகளைப் பெறுவதற்காக ஒரு குறிப்பிட்ட வங்கியின் ஆதார் எண்னை இணைத்துள்ள வாடிக்கையாளருக்கு அளிக்கும் அளித்திருந்தால் சமர்ப்பிக்கப்பட்ட வங்கிக்கு நேரடி மானியப் பணிக் பரிமாற்றம் செய்வதற்காக என்ரிசிஐ-யால் செய்யப்பட்டுள்ள ஒரு வசதி ஆகும்.
- ஐடிஎன் எண் ஒப்புதல் விண்ணப்பம் பெறுகின்ற வங்கியால் வழங்கப்படும்.