THE AHMEDABAD DISTRICT COOPERATIVE BANK LTD.

Channel Access Request form(ATM,Internet banking(NF), Mobile banking access form-Non Individual)

(Sole Proprietorships, Partnerships, Limited Companies, HUFs, Trusts, Societies, Associations, Clubs)					
Details of Organisation					
Name		i dalla Massa	L.ANI		
First Name	M	iddle Name	Last Name		
CIF Number					
Channel Access for Authorised Signatory 1					
CIF Number					
E-mail Address (Mandatory for Net Banking facility)					
	Debit Card	Net Banking	Mobile Banking		
Deposit Account(s)					
Additional details for Debit Card					
Primary Account					
(While all accounts maintained by the organ through the card on all The Ahmedabad Di ATMs or merchant establishments. In case primary account.)	strict coop bank ltd ATMs,	this is the account that w	ill be available on any of the RUPAY		
Signature of Authorised signatory Name & Designation					
With Stamp of Organization					
Channel Access for Authorised Signatory 2					
Customer Relationship Number					
E-mail Address (Mandatory for Net Banking facility)					
	Debit Card	Net Banking	Mobile Banking		
Deposit Account(s)					
Additional details for Debit Card					
Primary Account (While all accounts maintained by the organisation to which the above is an authorised signatory can be viewed or can be accessed through the card on all The Ahmedabad District coop bank ltd ATMs, this is the account that will be available on any of the RUPAY ATMs or merchant establishments. In case no account is specified, the first account opened with the Bank will be treated as the primary account.)					
Signature of Authorised signatory With Stamp of Organization		Name & Designation			

Notes: 1) Existing customers can use this channel access request form for getting access to services and products (Net Banking, Mobile banking, and Debit Card) they have not availed of earlier.

- 2) This form should be accompanied by the Resolution of the Board/Managing Committee in case of Limited Companies, Trusts, Societies, Associations and Clubs; partnership letter in case of partnerships. Distinct Board/Managing Committee Resolution and Partnership Letter is to be provided for each Deposit and/or Demat Account, as applicable.
- 3) In case of Partnerships, Limited Companies, Trusts, Societies, Associations, and Clubs all signatures should be accompanied by stamp of the organisation, as applicable.
- 4) In case of Partnerships, Limited Companies, Trusts, Societies, Associations, and Clubs Debit Cards will be issued only to person(s) with unconditional mode of operation/ authority.
- 5) Proprietor of a proprietorship concern and karta of an HUF will get both financial and non-financial transactions on Net Banking and Mobile Banking. They are also eligible for Debit Cards.
- 6) The Net Banking and Mobile Banking access is applicable for all Deposit Accounts current or to be opened in future for the Organisation.

The resolution is to be given on Organisation's Letter Head.

Extracts of the minutes of the meeting of the Directors/Managing Committee of held at .	Board of	
Chairman of the meeting informed the other r Company/Trust/Association/Society being a desirous of availing of Net Banking, Mobile B. Coop Bank ltd.	customer of The Ahmedabad D	istrict Coop Bank Ltd, is now
The following resolutions were		
unanimously passed.		
Unanimously resolved:		
 That the Company/Trust/Association/Society Card offered by The Ahmedabad District conditions applicable to Net Banking, Mobi 	Coop Bank LTd. That the Co	mpany has read the terms and
2) The Company/Trust/Association/Society/Cl	lub hereby authorises	
Mr./Ms. Mr./Ms. Mr./Ms.	(Designation)	
to avail of the Net Banking, Mobile Banking a (Company/Trust etc to give specifics)	nd Debit Card offered by the B	ank in the manner specified
3) That the Company/Trust/Association/Society case any of its authorised signatory's Net I The Company/Trust/Association/Society/C the aforesaid term.	Banking, Mobile Banking and [Debit Card needs to be revoked.
4) That the Company/Trust/Association/Society Card and other items enabling access sure authorised as above at the mailing address	uch as PIN, password, etc. to	
5) That the Company/Trust/Association/Socie account stated by the authorised signatory		
6) That the Company/Trust/Association/Soci opened in future will be linked to the Debi instructions will be given for de-linking any	it Card(s) issued to any autho	
7) That the Company/Trust/Association/Societ discretion, discontinue any of the services	ety/Club hereby understand the completely or partially without a	
8) That a copy of these minutes be forwarded	to the Bank.	
Signature of the Secretary/Director Under seal/stamp as applicable	Place	Date
Name of the Secretary/Director		

Partnership Letter

The Partnership Letter is to b	e given on the Letter Head of th	ne Partnership.		
<u> </u>		(the Firm), a partnership firm having its principal		
		s of the Firm, constituting the requisite forum, were		
•		, Mr./Ms.		
and Mr./Ms.				
and Mr./Ms was he	eld			
Mr/M s	·	artners that the Firm being a customer of The Ahmedabad District Coop Bank Ltd, is now desirous of availing of Net		
Banking, Mobile Banking and	I Debit Card provided by The Al	hmedabad District Coop Bank Ltd.		
After discussions, it was unar	nimously agreed.			
Bank Ltd. That the Firm h Card and accepts the sam 2) The Firm hereby authorises	nas read the terms and condition e.	and Debit Card offered by The Ahmedabad District Coopons applicable to Net Banking, Mobile Banking and Debit		
	(Design			
	(Desigr (Desigr			
	, ,	offered by the Bank in the manner specified.		
That the Firm undertakes Banking, Mobile Banking a not comply with the afores: That the Firm hereby auth	to inform the Bank 15 days in and Debit Card needs to be revolated term. The property of the total term and the property of the Bank to mail/courier	n advance in case any of its authorised signatory's Net bked. The Firm will not hold the Bank responsible if it does the Debit Card and other items enabling access such as		
Bank.	·	orised as above at the mailing address recorded with the rimary account stated by the authorised signatory's for servic		
charges as applicable from 6) The Firm hereby agrees t issued to any authorised si	n time to time. that all existing account(s) or to ignatory and that specific instructions that the Bank may at its about to us.	o be opened in future will be linked to the Debit Card(s) ctions will be given for de-linking any account(s). bsolute discretion, discontinue any of the services completely c		
Names of all the Partners 1		Signatures		
2				
3				
-				
Date		Place		
•				
For Bank Use Only				
Branch Name		Request Captured by		
		Request Authorised		
		by		
Signature & Stamp		Date		
Data				