

Application for availing Mobile Banking Services

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

The Branch Head Kanara DCC Bank Ltd., (Branch)

Dear Sir,

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

Name of the Customer	
Address	
Date OF Birth	
PAN Number	
E- mail (Mandatory)	
Bank Account number (Savings/ Current)	
CIF	
Mobile Number (As entered in CIF)	
User Type (Tick 🗸 where ever applicable)	View Only Transactional

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 Kanara DCC Bank Ltd., and that I/we agree to all the terms/conditions of applying/availing/maintaining/operating (as applicable) for usage of Mobile Banking service of Kanara DCC Bank Ltd., as may be in force from time to time. I/we further authorize Kanara DCC 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 been verified and found correct and submitted to Head Office for the registration process.