



ATM / DEBIT CARD APPLICATION FORM

Thank you for applying for the Jila Sahakari Kendriya Bank ATM Debit / Rupy Card. To help us process your request quickly please fill this form as per the instructions overleaf if you have any questions, please check with your Branch Official, We are committed to making your life simpler with the Jila Sahakari Kendriya Bank CARDS.

Application No:

<input type="checkbox"/> New	<input type="checkbox"/> Renewal	<input type="checkbox"/> Replacement	
Application No: <input style="width: 100px;" type="text"/>			
Name <input style="width: 95%;" type="text"/>			
Name as you would like it on the card (max. 25 letters (including spaces)) <input style="width: 95%;" type="text"/>			
Address: <input style="width: 95%;" type="text"/>			
Town/City: <input style="width: 95%;" type="text"/>			
State: <input style="width: 95%;" type="text"/>			
Telephone: <input style="width: 40%;" type="text"/> Mobile <input style="width: 15%;" type="text"/> Pin <input style="width: 45%;" type="text"/>			
Mail: <input style="width: 95%;" type="text"/>			

My designated account/s on which I require CARD services

Account Type:

<input type="checkbox"/> Savings	<input type="checkbox"/> Current	<input type="checkbox"/> Overdraft	
			<input type="checkbox"/> Male <input type="checkbox"/> Female

Date of Birth

A/C No.

TYPE OF ATM CARD APPLIED FOR :(Read Overleaf before selecting Card Type)

<input type="checkbox"/> ATM-cum-Debit Card	<input type="checkbox"/> Yuva Card	<input type="checkbox"/> International Debit Card
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JSKB Gold International Debit Card	1.VISA	2.MASTERCARD
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DECLARATION: I am aware of the terms and conditions governing the use of the ATM Card and agree to abide by them. The bank may call me at my residence / office in connection with my ATM transactions.

Place:

Date:

Applicant's Signature

FOR OFFICE USE

<input type="checkbox"/> New	<input type="checkbox"/> Renewal	<input type="checkbox"/> Replacement	
			date <input style="width: 100px;" type="text"/>

ATM Branch Code	<input style="width: 95%;" type="text"/>
ClF of Customer	<input style="width: 95%;" type="text"/>
Issue Card	YES <input type="checkbox"/> NO <input type="checkbox"/>

Branch Official's
Signature & Branch
Stamp

Old ATM Card No.

Ticket No.

Old ATM card No. to be mentioned for a replacement or renewal of the card. Ticket No. in case of Lost ATM card.