APPLICATION FOR BUSINESS DEBIT CARD

(For New and Existing Accounts)

M-351



ALTERNATE CHANNEL CELL 388/1 UFFIZI COMPLEX - FIRST FLOOR AVINASHI ROAD, PEELAMEDU COIMBATORE 641004

| NAME OF THE BRANC | НВ | BRANCH CC | | DDE | DE CUSTOMER | | | R ID | D DATE | | | | = | | | | |
|---|-----------------------------|-------------------|-----|---------------|-------------|----------------|---------------|---------------|---------------------------|-------|-------|------|------|------|-------|-----|--|
| | | | | | | | | | | | | | | | | | |
| ACCOUNT NUMBER | | | | | | | | | | | | | | | | | |
| NAME OF THE ACCOUNT : | | | | | | | | | | | | | | | | | |
| #NAME TO BE PRINTED ON THE CARD: | | | | | | | | | | | | | | | | | |
| CARD BRAND: RUPAY MASTERCARD VISA | | | | | | | | | | | | | | | | | |
| E-COMMERCE YES NO | | | | | | | | | | | | | | | | | |
| PHOTO CARD YES | | 10 | | DA | TE C |)FB | [RTH | 1 | | | | | | | | | |
| CUSTOMER ID: | | | | | | | | | | | | | | | | | |
| EMAIL: | | | | | | MOBILE: | | | | | | | | | | | |
| ADDRESS | | | | | | | | | | | | ٨ | CCT | V | | | |
| | | | | | | | | | AFFIX STAMP SIZE PHOTO | | | | | | | | |
| | | | | | | | | | HERE | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Declaration : | | | | | | | | | | | | | | | | | |
| I have read and accepted the terms and conditions* governing the opening of an | | | | | | | | | | | | | | | | | |
| account with KVB and those relating to various services of K V B Debit Card including | | | | | | | | | | | | | | | | | |
| but not limited to (a) ATM (b) POS (c) E-com Transactions | | | | | | | | | | | | | | | | | |
| E Commerce Consent I Understand that as per Domestic POS transactio by the bank only upon sp bank to enable E Comme | RBI di ns and pecific | That E request | Con | nmer he ca | ce tra | ansac older | ction I he | thro ereby | ugh | ı del | bit d | card | will | be a | ctiva | ted | |
| | | | | | | | | | | | | | | | | | |
| Applicant/ Authorised Signatory Date : Officer/Ma | | | | | | | | anac | nager's Signature Date: | | | | | | | | |

*Branch may please ref frs.com # In whose name the card is to be issued

Note: Business Debit Cards applicable only to Current Accounts

Necessary request letter to be obtained in company letter head for authorization to avail this facility