

ATM F-1

**BANK OF MAHARASHTRA**

(H.O. : Lokmangal 1501 Shivajinagar, Pune 411005.)

**Branch MICR No.**

**Serial Number**

**ATM CARD APPLICATION FORM**

(Please fill in block letters) (Please put (tick) in appropriate box)

To,

The Branch Manager,  
Bank of Maharashtra,  
\_\_\_\_\_ Branch,

Dear Sir,

I/We wish to apply for the ATM (Automated Teller Machine) Card. The details are as under.

**PERSONAL INFORMATION**

- 1) Name  
(as to be embossed on the card)  
2)

| Name in | SURNAME | FIRST NAME | MIDDLE NAME |
|---------|---------|------------|-------------|
| Full    |         |            |             |

- 3) Date of Birth DD-MM-YYYY

- 4) Address (Please put (X) in the box below indicating your choice of address to which correspondence is to be sent)

| RESIDENCE ADDRESS ( ) | OFFICE ADDRESS ( ) |
|-----------------------|--------------------|
|                       |                    |
|                       |                    |
|                       |                    |
| PIN                   | PIN                |
| Telephone Number :    | Telephone Number : |

**OCCUPATION / BUSINESS INFORMATION**

- 5) Current Employer/Business Name \_\_\_\_\_  
Nature of business \_\_\_\_\_  
Designation \_\_\_\_\_ Length of Business/Service \_\_\_\_\_  
Business Registration No. \_\_\_\_\_ Annual Salary/Business Income \_\_\_\_\_  
Other Annual Income \_\_\_\_\_ Permanent Income Tax No. \_\_\_\_\_ Ward \_\_\_\_\_ Circle \_\_\_\_\_

**FINANCIAL INFORMATION**

- 6) Primary Account details (the Saving Bank or Current Account)

| Type | Account Number | Balance | Joint Holder's Name/s (If Any) |
|------|----------------|---------|--------------------------------|
|      |                |         |                                |

**7) If any other Credit/ ATM Card held**

| Sr. No | Name of the Card | Issuing Institution | Valid Up To | Limit, if any |
|--------|------------------|---------------------|-------------|---------------|
|        |                  |                     |             |               |
|        |                  |                     |             |               |
|        |                  |                     |             |               |

**8) Nationality : Resident status (State whether Indian Resident or Non Resident)****9) Document for positive identification (Passport/Driving License/Identity Card/Ration Card/Voter's I-Card etc.)**

| Issued By | No | Date of Issue |
|-----------|----|---------------|
|           |    |               |

**10) DECLARATION :**

I/We declare that the above information is correct. I/We have read and understood the terms and conditions of the ATM Card Scheme as annexed to this application. I/We authorise the Bank to contact my/our employer or any source to obtain any further information that may be required. I/We hereby authorise the Bank to issue to me/us an ATM CARD as requested and debit my/our above mentioned Primary account for all withdrawals to be using the card and also to recover the Bank's charges/fees as applicable from time to time. Without any prejudice to above, I/We accept the Bank's lien on my/our all deposits, present and future, held in the above mentioned Primary Account.

Authorised Signature/s 1.  
2.  
3.

**FOR USE OF THE ISSUING BRANCH****BRANCHAPPLICATION SR. NO.**

The details mentioned in the application form are verified by us and the application is sanctioned and forwarded to ATM Card Cell, Mumbai, for issuance of the Card.

Basis of eligibility (Please put tick in appropriate box) Verification of 1. Salary Certificate 2. Income Tax Return  
3. Wealth Tax Return

Signature of Branch Manager, Signature Code No.      Seal of the Branch      Name and Designation      Date

**TO BE FILLIED IN BY ATM CARD CELL, MUMBAI**

1. Application Received on      2. ATM Card No.  
3. Card Deposit on :      4. Information sent to the SPNS Switch on :  
(Only in the case of Mumbai branches)

Seal & Signature of Authorised Official ATM Card Cell