



## (H.O.: LOKMANGAL, 1501,SHIVAJINAGAR, PUNE411005) Application For Internet Banking, Mobile Banking and Phone Banking (All fields with \* are mandatory to be filled) To be filled in Capital Letters only

	Manager, f Maharashtra,					
	Branch					
	We wish to apply as under: Name of the Applicant/Account/Title. M/s.					
Mailing	g Address:*					
City*	S1	ate*	Pin Code	k		
Email A	Address:*					
Phone 1	No. with STD Code.*					
Mobile	No(s)of Authorised Sign	natories To Accoun	t.) *	·		
	nt No*::					
Date of	Incorporation / Establis		<del></del>	PAN No	TAN No	
		DD MM	YY			
Constitution*:       Sole Proprietorship       HUF       Partnership       Trust         (Pl. tick appropriate box.)       Pvt.Ltd co.       Public Ltd.Co.       Society       Others Pl.Specify:						
Internet Banking						
<ul> <li>□ We want to apply for Bank of Maharashtra Internet Banking. Please link our accounts given below.</li> <li>□ I / We have an Internet Banking User Id, but do not remember it and I /We want to be resent to me along with passwords.</li> <li>□ My/Our Internet Banking User Id is</li></ul>						
Mob	ile Banking					
<ul> <li>□ We want to apply for mobile banking services of Bank Of Maharashtra in respect of all our accounts mentioned below.</li> <li>□ We forgot/lost our mobile banking TPIN, please send us the new mobile banking TPIN.</li> </ul>						
Pho	Phone Banking					
<ul> <li>□ We want to apply for Bank Of Maharashtra Phone Banking. Please link our accounts given below.</li> <li>□ We have a Phone Banking User Id, but do not remember it and we want it to be resent to us along with TPIN(s)</li> <li>□ Our phone banking User Id is Please send us Login /Transaction / both TPIN(s)</li> <li>□ Our Phone Banking User Id is Please link our other accounts given below to it.</li> </ul>						
Account Details.*						
Sr. No.	Account Number	Branch Name	Branch CODE	Mode of Operation	CIF Number [For office use]	

Cor	porate Details (For Grant	ing Transa	ectional Autho	rity to Va	rious Corp	orate U			
Sr.No.	Full Name	Details of Divisions/Sections within the corporate				Details of Role/Designation with in Corporate (Start from 0=Lowest)			
-									
Cor	porate User Details* (A)						•		
Sr.No.	Name & Address of User	Birth	th Place of Birth Mother's Maiden Name				Signature of		
		Date				Opt	ion V/R/T		User
the Ban	g , Renewal & Amendment. '' k. Online transfer/Schedule tran  porate User Wise Limits I	nsfer of fund	s from linked a/c.				2 33 , 111 110	mi	- passy . No main
Sr.No.	Name of User	Individual login Id	Designation/role	Initianting Limit (Rs.)	Approving Limit Individual User Id by In case of More than One approval which				
					From Rs.	To Rs.	No Appro		approval reqd.
							Rec	Įd	
keyed i initiato Please	ntor is the Individual user initian by the initiator.3. Initiator are and approver.  attach separate sheet if more decreby confirm that mandate fro letterhead.	ad approver of	cannot be the sar	me individu	al. 4. Any fu	nd transf	er request r	iecess	arily will involve
Signati	ure:								
1	Name Des	Name Designation&Address							
2	Name,Designation&Address								
3	Name,De	Name, Designation & Address							
4	Name,De	signation&A	.ddress						
Addres	ils of official Authorised to do								
	2. Details of official Authorised to do Mobile/SMS Banking. Name: Designation								

Place : \_\_\_\_\_

Date:

## **Declaration**

We affirm, confirm and undertake that we have read and understood the Terms and Conditions applicable for usage of Bank Of Maharashtra Internet Banking, Mobile Banking and Phone Banking services of the Bank. We are aware that the usage of Bank of Maharashtra Internet Banking, Mobile Banking and or Phone Banking- is governed by the terms and conditions which are displayed on www.bankofmaharashtra.in the site maintained by Bank Of maharashtra and we have read & understood the contents of the same. Further, we unconditionally accept the terms and conditions governing internet banking, mobile banking and or phone banking of Bank of Maharashtra applicable for bank accounts as displayed on bank's website. We accept and agree it. We are aware of the contents of terms and conditions and that all our rights and liabilities would be governed by the said terms and conditions by our act of accessing on www.bankofmaharashtra.in. We hereby agree to be subject to and comply with all the provisions of the terms and conditions which are incorporated by reference herein and deemed to be part of this application form to the same extent as if such provisions have been put forth in full herein. Necessary Resolution/Authorisation are enclosed on the Letterhead.

We hereby declare that all particulars and information given in this application form (and all documents referred or provided there with) are true, correct, complete and up-to-date in all respects and we and other authorized account users have not withheld any information from bank. We understand that certain particulars given by us are required by the operational guidelines governing banking companies. We agree and undertake to provide any further information that Bank Of Maharashtra may require.

We do hereby indemnify and forever keep indemnified the Bank and its successors and assignees from and against and all claims, actions, penalties that may be made, suffered or incurred by reason of non observance of any of the terms and conditions mentioned therein.

We agree and understand that Bank Of Maharashtra reserves the right to reject any application without providing any reason. We agree and understand that Bank of Maharashtra reserves the right to retain the application form and documents provided therewith and will not return the same to us.

Signature:		
1	Name & Designation	PAN No
2	Name & Designation	PAN No
3	Name & Designation	PAN No
4	Name & Designation	PAN No
Place :		
Date :		
	FOR OFFICE US	E ONLY
		(To be certified by branch only)
and found correct. T		stomer and mode of operation of the account/s is/ are verified be account. The application is sanctioned and forwarded to
	Branch Seal	
		Signature of the Branch Manager. Signature Code No:
D.		Name & Designation:
Place:		
Date:		
	FOR USE OF INTERNET BA	ANKING CELL
Application Accepted	1 / Rejected / PIN/TPIN Issued	
		Authorised Official
Place:		
Date :		