

The Mehsana Urban Co-op. Bank Ltd., Mehsana. (Multi-State Scheduled Bank)

Head Office: Urban Bank Road, Highway, MEHSANA. Phone: (02762) 251908, 252681, Fax: 245206 Website: www.mucbank.com E-mail: Info@mucbank.com

APPLICATION FORM FOR INTERNET BANKING

Please Fill the form in English and Capital letters. Fields Marked * (Star) are Mandatory

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Declaration:

I / We confirm that the details mentioned in the application form (Point no 1 to 6) are correct and in my knowledge.

I / We have read and agree to abide by the terms and conditions governing Internet Banking and understand that any changes to the terms and conditions will be available on the website www.mucbank.com / www.mucbank.com / www.wucbank.com / www.mucbank.com / www.mucbank.com / www.mucbank.com / www.mucbank.com / www.mucbank.com / www.mucbank.com / www.mu

I/We are aware of the fact that the facility of Internet Banking is granted solely at our request and that the Bank shall in no way be responsible for any kind of hacking and / or phishing attacks and / or cyber related crime, which may take place or happen in the account during the pendency of the facility and which may result in a loss due to the transfer of the funds from my / our account to the third party's account. I/We are also aware of the fact that while Bank has taken all necessary available precautions the chances of such attacks by third parties cannot be ruled out in any view of the matter the Bank shall stand indemnified from any such claims from our side.

I / We shall advise the Bank immediately in case of any change in the above details including the addition and deletion of user and the information given in the Application form.

Necessary resolution / authorization is enclosed on the letterhead. The requisite documents like board resolution / declaration etc. are required to be submitted giving mode of operation and limits.

7. Signature (R	equired signature of all joint hold	ders or Partners)										
1. Name:	Name: Signature:											
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I hereby confirm	For Branthat the mode of operation of the ac	nch / Office Use only ccount(s) and signature(s) of the client are verif	ied								
	Officer Manager											
Name		Name										
Emp. Code		Emp. Code										
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Note if any :				Seal								