

# The Haryana State Co-operative Apex Bank Ltd

## Application for RuPay Debit Card

I wish to apply for The Haryana State Co-operative Apex Bank Ltd RuPay Debit Card. Name of the Branch

Account Type  Account Number

I have an ATM card no. (leave blank if not applicable)  issued to me

and linked to the account. I would like to link our savings account to the debit card also.

- I confirm that I have the required mandate to operate the account singly.
- I/We authorize The Haryana State Co-operative Apex bank Ltd to issue a RuPay Debit card to me/us
- I/We understand that upon issue of a RuPay debit card to me/us, the existing ATM card of The Haryana State Co-operative Apex bank Ltd standalone ATM if any, may be deactivated.
- I/We further unconditionally and irrevocably authorize you my/our account annually for RuPay Debit Card fees/Charges.

The particulars are as under:

1. Name   
 Date of Birth    Gender Male  Female   
( DD / MM / YYYY )

Name as required on card

(Not to exceed 20 characters) (No Nicknames) (Please leave one blank space in between each name)

2. Residential Address

City  Pin Code

3. Office Address

City  Pin Code

Tel. No(O)  (R)

Mobile No.  E-Mail

Office  Residence

4. Preferred Address for Delivering RuPay Debit Card/Pin Mailer

### Declaration/RuPay Debit Card Undertaking

I/We have received, read and understood the terms and conditions governing the usage of the RuPay Debit Card. I/We accept to be bound by the said terms and conditions and to any changes made therein from time to time by the Bank at its sole discretion without any notice to me/us. I confirm that i am the sole account holder or have the required mandate to operate the account linked to the RuPay Debit Card singly and that I/We have completed 18 years of age. I/We understand that upon issue of RuPay Debit Card to me/us, the existing ATM card of The Haryana State Co-operative Apex bank Ltd standalone ATM linked to my/our account will be deactivated.

I/we understand and undertake that the usage of the RuPay Debit Card shall be strictly in accordance with the Exchange Control regulations and in the event of any failure to do so, I/We will be liable for action under the Foreign Exchange Management Act, 1999 and the amendments thereof stipulated by Reserve Bank of India from time to time.

I/We accept full responsibility for my/our RuPay Debit Card and agree not to make any claims against The Haryana State Co-operative Apex bank Ltd in respect thereto.

(Applicant's Signature)

(Other Account Holder/s Signature)

Date:  Branch Name:  Branch Code:

Reason For Issue	First	Joint
New Card	<input type="checkbox"/>	<input type="checkbox"/>
Last Card	<input type="checkbox"/>	<input type="checkbox"/>
Damaged Card	<input type="checkbox"/>	<input type="checkbox"/>
Others	<input type="checkbox"/>	<input type="checkbox"/>

For use in Branch	Name of the Officer	Signature
Signature verified by		
Eligibility verified by		