## Customer Request Form (\* Fields are mandatory)

## DCB BANK

The Branch Head  DCB Bank Limited	Tracker F	leference N	o.:				ase affix
	Branch		Date:	D D M	M Y Y Y		otograph
Customer Name: Mr. Mrs.	Ms. M/s.	Dr.	Prof.			Sign acro	oss the photo
						(Applicable	e to point No. 8
(First Name)	(Middle Name)			(Last Na	me)	on ISA u	pdation only)
*Account No.:			*Customer II	D:			
*My Occupation:			*Occupation	Code:			
Note: All support documents or proofs should I	be "Self Attested"						
Update Contact Details (Please Tick th	ne Appropriate Box)						
1. Change of Address:	Commu	nication	Perma	nent I	Both (Communica	ation and Permanent)	
Cit	hv.				Pin:		
Landmark:							
State:			Country:				Signature
Note: Kindly provide proof (For Individuals - applicable	le for accounts less than 6			ress proof is mandate	ory) of the new mailing a	ddress along with this form.	
Change of Mobile Number  Note: *Authorised signatory/ies of the Firm / Company the Bank from time to time.  Change of Telephone Number	New Mobile Numb ny/Trust/Association/So New Telephone No	ciety are eligible	9 1 stor free Mobile ale	ert facility subject to o	compliance of terms and	J conditions as stipulated by	registered for SMS Alerts. You will receiv any Bank relats promotional calls, SMS aler
Change of Email ID	New Email ID:						New email
Update my PAN Number	PAN Number:				(Copy of PAN care be self-attested)	d required, it should	address will be updated only in the
Update my Aadhaar Number	Aadhaar Number:					(Copy of Aadhaar card required, it should be	account number mentioned above
Link Aadhaar Number to Account	t Number					self-attested)	<b>*</b>
Registration Details (Please Tick the Ap			y for following	service/s			
Phone Banking *Your	r Mother's Maiden N	Name:					
Phone Banking *Your  Preferred Language Options: English	r Mother's Maiden N	Name: Marathi	y for following Gujarati	service/s Tamil	Telugu	Oriya Punjabi	
Phone Banking *Your  Preferred Language Options: English  SMS Alerts Mobil	r Mother's Maiden I	Name: Marathi 9 1	Gujarati	Tamil			
Phone Banking *Your  Preferred Language Options: English  SMS Alerts Mobil  Note: *Authorised signatory/ies of the Firm / Company / To the Bank from time to time.	r Mother's Maiden I	Name:  Marathi  9   1	Gujarati  Gujarati	Tamil facility subject to co	ompliance of terms and		
Phone Banking *Your  Preferred Language Options: English  SMS Alerts Mobil  Note: *Authorised signatory/ies of the Firm / Company / Trithe Bank from time to time.  Mobile Banking Registration Pleas	r Mother's Maiden I  Hindi  Hele Number: +  Trust / Association / Societ  See fill a separate Mo	Marathi  9 1  y are eligible fo	Gujarati Gujarati Gujarati	Tamil facility subject to co	ompliance of terms and		
Phone Banking *Your  Preferred Language Options: English  SMS Alerts Mobil  Note: 'Authorised signatory/ies of the Firm / Company / Tithe Bank from time to time.  Mobile Banking Registration Pleas  Internet Banking (Kindle	r Mother's Maiden I  Hindi  He Number: +  Trust / Association / Societ  se fill a separate Mo	Marathi  9 1  y are eligible fo	Gujarati Gujarati Gujarati	Tamil facility subject to co	ompliance of terms and		Signature  Email id needs
Phone Banking *Your  Preferred Language Options: English  SMS Alerts Mobil  Note: *Authorised signatory/ies of the Firm / Company / Tothe Bank from time to time.  Mobile Banking Registration Pleas  Internet Banking (Kindle E-statement Registration *Ema	r Mother's Maiden I  Hindi  He Number: +  Trust / Association / Societ  se fill a separate Mo	Name:  Marathi  9   1   y are eligible for bile Banking	Gujarati Gujarati Representation of the service of	Tamil facility subject to co	ompliance of terms and Account Holder	conditions as stipulated by	Signature  Email id needs
Phone Banking *Your  Preferred Language Options: English  SMS Alerts Mobil  Note: *Authorised signatory/ies of the Firm / Company / Tithe Bank from time to time.  Mobile Banking Registration Pleas  Internet Banking (Kindle E-statement Registration *Emaily  Frequency of E-statement: Daily	r Mother's Maiden I  Hindi  He Number: +  Trust / Association / Societ  se fill a separate Mo	Marathi 9 1 1 y are eligible for bile Banking n where into	Gujarati Gujarati Representation of the service of	Tamil facility subject to co	ompliance of terms and		Signature  Email id needs to be mentione for Internet



## **DCB 24-Hour Customer Care**

Call Toll Free: 1800 209 5363 Email: customercare@dcbbank.com

Web: www.dcbbank.com

**DCB BANK** 

F	equ	est (Please Tick the Appropriate Box)							
1.		New Cheque Book Request  Number of Cheque Leaves required:	Limit of cheque book issuance						
2.		Statement of Account / Duplicate Statement  Statement required from date   D   D   M   M   Y   Y   Y   to   D   D   M   M   Y   Y   Y   Y   Y   Y   Y   Y							
3.		Consolidated Statement of Account (Applicable for all your accounts)	•						
4.		Pass Book (please issue)	Signature						
5.		Change Mode of Operation (Individual accounts only) for Account No.							
	to	Self Jointly Either or Survivor Former or Survivor Guardian							
6.		Senior Citizen Updation: Date of Birth DDDMMMYYYYY	Attach DOB Proof						
7.		Account Activation (Activation of Dormant Account)	***************************************						
		son for not operating account ch ISA for Dormant Account and where KYC is incomplete)							
8.		ISA Updation Proof Submitted:							
9.		Reversal of Charges Date of Debit: D D M M Y Y Y Amount of Debit ₹:							
	I unc	dertake to henceforth keep an Average Quarterly Balance of ₹	Signature						
10.	Acc	ount Related Queries: Cheque Book not received Debit Card not received	<b>A</b>						
		Debit Card PIN number not received Fixed Deposit Receipt (FDR) not received	Debit / ATM & Rupay / Visa						
11.		New Debit card Rupay Short Name:	card will be issued as per product feature						
		New International Debit Card Short Name:	Maximum 19						
		New ATM card	characters. The name would appear on						
		Debit Card hotlisting Debit Card Number:	the Card.						
		Reissue of Card Reason Reason							
		Issue of Duplicate Pin of Debit / ATM Card							
12.		Internet Banking: Pin not received User ID not enabled Duplicate Password issue							
13.		Other Requests Specify	Signature						
secre Bank	y becau iable if a	ititions: I agree to discontinue the physical statements being sent to me. I understand that the email statements are for my convenience. DCB Bank Limited (the "Bank") shall not be liable or responsible for any streach of use the statements are being sent to the above email ID. I shall verify the authenticity of the emails I receive. I shall not hold the Bank responsible for any statement received from frauders / inposters. I shall not hold the my problem arises with my computer network because of me receiving statements from the Bank. I have been authorized by the other holders to receive the statements on the above email address. I shall immediately							
under	stood the	nk in writing if there is any change in the information given above. The Bank shall not be responsible if I do not receive statements due to incorrect email address and technical reasons. I confirm to have read and e terms & conditions pertaining to my account. This registration will override any "Hold Statement" facility availed in the past.							
I have	read and	arration  d understood the Terms & Conditions relating to various services offered by the Bank. I am aware of charges applicable for various services offered and I accept and agree to be bound by the said Terms & Conditions. I conditions for these services are available on the Bank's website www.dcbbank.com. I further authorize the Bank to debit my Account towards any applicable charges for any / various service / services provided as							
applic Bank	able fron	n time to time. I understand that in the event of me already being registered for Phone Banking, Net Banking, this application will be treated as an authenticated request for regeneration of my TPIN/IPIN. I agree that the lit my account for service charges as applicable from time to time. I agree to adhere to all the terms and conditions of opening / applying / availing / maintaining / operating (as applicable) for usage of mobile banking Bank as may be in force from time to time. I hereby expressly consent and authorise the Bank to make telephone calls, send SMSs or emails, IVR to voice out and enable Mobile Banking to inform / benefit me on any updates relating to the Bank's existing / new products / services / account information including SMS when a Pull SMS is sent. I agree and understand that by agreeing to receive the Statement(s) via E-mail under the							
Information or updates relating to the Bank's systsing/ new products/ services/ account information inducing sixts when a Pull SMs is sent. I agree and understand that by agreeing receive the statement(s) shall not be sent to me separately by post or in physical form, through whatever other means.  1 understand and agree that the consent given for updation / registration / requests for free Mobile alert facility shall be valid till such time I withdraw the same in writing. Unless specifically advised, the Bank will continue to send SMS alerts on the number requested by Authorised signatory/lies of the Firm / Company / Trust / Association / Society.									
Socie	y.	I not be responsible and liable for any consequences which may arise owing to change in name/s of authorized signatory/ies or partners or directors or trustees or members of the Firm / Company / Trust / Association / hat all the details provided in the form are correct.							
Nar									
Dat	e: [	D D M M Y Y Y Y  Customer Signature							
F	or B	ank Use Only							
Cus	tome	er request acted upon on DDMMYYYYYY							
On	D	D   M   M   Y   Y   Y     Y   Y   Y    Relevant charges debited ₹							
		rm that the account status is active and signature of the customer matches with our records.  □ Mobile Number □ Email address of the customer and confirm it to be right as per our records							
		the Branch Official:							
243-	/er 1.0	Signature of Branch Official with Seal P-Apr 2013 DCB Bank Limited	M008 / Jan 16 / 1.2						
		l-Apr 2013							
W/a	ackn	owledge receipt of 'Customer Request Form' from	(customer						
		n for	(0.0.0.011161						
		Propol Official:							