



The Nawanagar Co-Operative Bank Ltd., Jamnagar.
INTERNET BANKING (VIEW MODE ONLY) Registration Form

To,
The Branch Manager,
 The Nawanagar Co-operative Bank Ltd.
 Branch,
Jamnagar.

Date* | |
 DD | MM | Y Y Y Y

FOR PARTNERSHIP FIRM

Dear Sir / Madam,
 We wish to avail the Internet Banking (view only) facility offered by the Bank as per details below:

Customer ID:

Account Numbers:

We agree,

- 1) that the Firm avails of the Internet Banking facilities (view only) offered by The Nawanagar Co-operative Bank Ltd.,
- 2) that the Firm has read the terms and conditions applicable to Internet Banking facility (view only) and accepts the same.
- 3) the Firm hereby authorizes, Mr. /Ms. _____ (Partner), to avail of the Internet Banking facilities (view only) offered by the Bank.
- 4) that the Firm undertakes to inform the Bank 15 days in advance in case any change in signatory's for the Internet Banking (view only) facilities. The Firm will not hold the Bank responsible if it does not comply with the aforesaid term.
- 5) the firm hereby agrees that the Bank may debit from our account the service charges, if any, in this regard.
- 6) the Firm hereby understands that the Bank may at its absolute discretion discontinue any of the services completely or partially without any notice to us.

In the premises aforesaid, we hereby jointly and / or severally agree to indemnify and keep indemnified the Bank, of / from and against all costs, charges, claims, disputes and consequences, whatsoever, arising out of the Internet Banking facilities (view only) to the partners.

Please send the User ID and password on Registered
 Mobile No. of authorised person as above.

Name	Signature (with Rubber Stamp) (of all partners)
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Date: ___/___/___ Place: _____

For Office Use Only

- 1) The information furnished by the applicant is verified and found correct.
- 2) The Account No. and the above signature/s have been verified and found correct.

The request of Customer _____ having ID _____ for the above accounts may be enabled and necessary password may be generated and sent to the applicant directly.

Date: ___/___/___ Signature of the Branch Manager: _____

