

APPLICATION FORM FOR ATM / DEBIT CARD
(FOR: PERSONALISED / NON- PERSONALIZED / ADD-ON CARD)
(Please Tick)

BO: _____

Distinctive No _____

Date / / - / / - / /

Affix Passport Size Photograph (for Photo Based Personalized Card only)	Affix Passport Size Photograph (for Photo Based Personalized Card only)
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Request for issuance of ATM / Debit Card (PI Tick) : CLASSIC PLATINUM MITRA
KISAN-ATM KISAN-Debit Card RAKSHAK Classic RAKSHAK Platinum OTHERS

1 (a) NAME OF ACCOUNT HOLDER (IN BLOCK LETTERS)	
1 (b) NAME OF 2 nd ACCOUNT HOLDER (IN BLOCK LETTERS) (Please attach separate sheet in case of more account holders)	

2 (a) NAME OF ACCOUNT HOLDER (IN BLOCK LETTERS) (To be embossed on card) Max 20 Characters																				
2 (b) NAME OF 2 nd ACCOUNT HOLDER (IN BLOCK LETTERS) (To be embossed on card) Max 20 Characters																				
2 I NAME OF 1 st ADD-ON CARDHOLDER (IN BLOCK LETTERS) (To be embossed on card)																				
2 (d) NAME OF 2 nd ADD-ON CARDHOLDER (IN BLOCK LETTERS) (To be embossed on card)																				

* For Add-on card, please mention relation with the Account holder and Date of Birth of ADD ON Cardholder: -

1st Add-on cardholder's Relationship with Account Holder _____ DOB / / - / /

2nd Add-on Cardholder's Relationship with Account Holder _____ DOB / / - / /

3. TYPE OF CARD (Please tick): (I) PERSONALIZED (II) NON-PERSONALIZED

4(a)	MOBILE No. *															
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(* Mandatory field. In case SMS Alert not registered earlier, this no. to be enabled for SMS Alert.)

4(b)	Email ID	
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5. DETAILS OF MAIN AND LINKED ACCOUNTS: -

DETAIL OF ACCOUNT	TYPE OF ACCOUNT (SF / CA / OD)	16 DIGIT ACCOUNT NUMBER																		
MAIN																				
LINKED																				
LINKED																				

Note: The Main and Linked Accounts should be in the same name and capacity. The linked accounts can be used for Card based transactions.

Declaration:

- I agree to abide by the terms and conditions related to ATM / Debit Cards as laid down by the Bank in the Bank's website at www.pnbindia.in.
- I shall be using my ATM / Debit Card only if I agree to the terms and conditions stipulated by the Bank for the same.
- I indemnify the Bank for all valid transactions undertaken through my ATM / Debit Card.
- I undertake to safeguard my ATM / Debit Card and not share my PIN with anybody to ensure its safety.
- I undertake that all transactions undertaken through the ADD-ON ATM/Debit Cards issued as per my request would be treated at par with transactions undertaken by me.
- The details furnished above are true to the best of my knowledge and belief.

Signature of 1st Account holder _____ Signature of 2nd Account holder _____ Signature of 1st Add-on Cardholder _____ Signature of 2nd Add-on Cardholder _____
FOR OFFICE USE ONLY -

Details of accounts and signatures of the account holder(s) as given above have been verified & Card issued as per request.	
1. Signature of Authorized Personnel	2. Signature of Authorized Personnel