

Mobile Banking - Account/CIF Addition/Deletion

Please fill in BLOCK LETTERS and complete all sections.



Bharat Co-operative Bank (Mumbai) Ltd
MULTI STATE SCHEDULED BANK

To, **Bharat Co-operative Bank (Mumbai) Ltd.** _____ branch Date _____

Dear Sir/Madam,

We request you to ADD/DELETE my undermentioned accounts/CIF under my existing Mobile Number.

MOBILE NO. OF USER	Can CREATE txn upto Rs.	Can AUTHORISE txn upto Rs.

Account Number(s)	Name of the Account/Joint Account Holders	USER's ROLE/ CAPACITY in the a/c (Self, Jt.holder, Guardian, POA, Karta Auth.Signatory, Proprietor, etc)	ADDITION OR DELETION	Signature

Note: All a/c's under the abovementioned CIF(s) will be shown to Mobile banking users unless specifically asked to be not shown.

Primary Account for Credit: _____

(This account will be credited when others transfer money **using your contact number** through Nexa)

Note: **FILL Transaction rules ONLY IF** there are more than 1 user & transactions **need AUTHORISATION by another user**

Please apply the following **TRANSACTION AUTHORISATION RULES** to the above mentioned accounts:

FROM AMOUNT (Rs)	TO AMOUNT (Rs)	No. of users who should Authorise. Write 0 if authorisation is not required	IF someone should COMPULSORILY authorise, Pls mention USER NAME (refer e.g. above)
1			

For e.g. ABC Society can set transaction rule like:

Upto Rs.500 per day, MANAGER should be able to do transfers - no authorisation is required.

From Rs.500 to Rs.5,000, txn should be authorised by any one amongst TREASURER or SECRETARY or CHAIRMAN.

From 5,001 to Rs.20,000, txn should be authorised by 2 persons out of (Treasurer, Secretary, Chairman).

From 20,000 to Rs.1 lakh, txn should be authorised by any 2 out of 3 authorised persons but **Secretary's authorisation is mandatory.**

We have read & understood the Terms and Conditions of Bharat Bank's Mobile Banking Service and accept the same.

Signature of the USER accepting Access to the above accounts

Signatures of all the account holder(s) / authorised signatories

OFFICE USE	All details on this form verified, including signatures	Details Updated & Verified in System
	BRANCH Staff No. Authorized Signatory	E-CHANNEL Staff No. Authorized Signatory