

Mobile Banking Registration: **MULTI-USER**

Please fill in BLOCK LETTERS and complete all sections.



Bharat Co-operative Bank (Mumbai) Ltd

MULTI STATE SCHEDULED BANK

JOINT ACCOUNTS:

Any of the holders can operate a JOINT ACCOUNT through Mobile Banking unless specific request is made for JOINT OPERATION by each user.

NON INDIVIDUALS - SOCIETY/COMPANY/TRUST/FIRMS/AOP etc

You can specify **USERS** who can operate the Account. You can also mention who can CREATE/AUTHORISE a txn & till what amount.

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.**

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

Dear Sir/Madam,

We request you to provide mobile banking facility for the under mentioned accounts/CIF to the undermentioned **USER** (person authorised by me/us to operate the undermentioned accounts).

NAME & EMAIL ID OF THE USER	MOBILE NO. OF USER	Can CREATE txn upto Rs.*	Can AUTHORISE txn upto Rs.*

*To be filled **ONLY for JOINT accounts** or **if there are more than 1 user** to the account(s) like company accounts

ACCOUNT(S)/CIF(S) for which Mobile Banking access is to be provided for the above user:

CIF (Customer No.) or Account Number(s)	Name of the Account/Joint Account Holders	USER'S ROLE/ CAPACITY/Relation to a/c (SELF, Joint Holder, Guardian, POA, Karta, AUTHORISED SIGNATORY, Proprietor, etc)

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)

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

(**FILL DETAILS ONLY IF** there are more than 1 user to the account[s]):

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			

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