

APPLICATION FORM



Thank you for applying for the **SBI ATM Card**. To help us process your request quickly, please fill this form as per the instructions below. If you have any questions, please check with your Branch Manager. We are committed to making your life simpler with the **SBI ATM Card**.

IMPORTANT INSTRUCTIONS

- ❖ Please fill the entire form in CAPITAL LETTERS only.
- ❖ Leave one box space between each word.
- ❖ Do not write outside the provided boxes.
- ❖ Complete all sections.
- ❖ Sign the declaration.
- ❖ If joint A/c please fill another application form.
- ❖ Joint A/c to be either or survivor / anyone or survivor.
- ❖ Ensure the application is attested by your Branch Manager.

S. No.

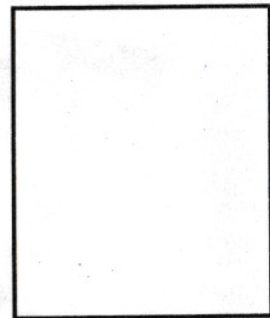
New	Renewal	Replacement
<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>

Your Name

Name as you would like it on the card (max. 25 letters) (Including spaces)

Address for Correspondence

Town/City
 State Pin Code



SPNS	Non SPNS
<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>

Telephone 2nd Telephone / Mobile Phone Number

My designated account / on which I required ATM services :

Primary Account	Savings <input style="width: 40px; height: 20px;" type="text"/>	Current <input style="width: 40px; height: 20px;" type="text"/>	Male <input style="width: 40px; height: 20px;" type="text"/>	Female <input style="width: 40px; height: 20px;" type="text"/>	
Saving A/c No.	<input style="width: 60px; height: 20px;" type="text"/>	<input style="width: 60px; height: 20px;" type="text"/>	<input style="width: 300px; height: 20px;" type="text"/> Branch		
Current A/c No.	<input style="width: 60px; height: 20px;" type="text"/>	<input style="width: 60px; height: 20px;" type="text"/>			

DECLARATION : ❖ I am aware of the Terms and Conditions governing the use of the ATM Card and agree to abide by them.
 ❖ The bank may call me at my residence / Office in connection with my ATM transactions.

Remarks :

_____ (Applicant's Signature)

For S.B.I. Use

DATE

ATM Branch Code	Branch Manager's Signature & branch stamp
Link Branch Code	
Issue Card Yes/No	
Daily Limit Rs.	

Old ATM Card No.
<input style="width: 800px; height: 20px;" type="text"/>
New ATM Card No.
<input style="width: 800px; height: 20px;" type="text"/>
Old ATM Card to be mentioned for a replacement of renewal of the card

Note : Please contract your branch after receiving the ATM within 45 days for pin Number.