



# Shree Vardhaman Sahakari Bank Ltd.

HEAD OFFICE :  
Near Tarkeshwar Mahadev, Raopura, Vadodara - 390 001.  
Ph. No. 0265-2410092 / 2437339. E-mail-shreevsb@svsbl.in

I wish to apply for :

Mobile Banking

My details are as follow

Name of the Customer : \_\_\_\_\_ (in block letters)

User Name required (If any specific): \_\_\_\_\_

Primary Account Number : \_\_\_\_\_ (13 digits)(Mandatory)

Customer ID : \_\_\_\_\_

Mobile Number : 91+ \_\_\_\_\_ (10 Digits)(Mandatory)

Email id : \_\_\_\_\_ (Mandatory)

PAN

ADHAR

Accounts to be linked for Mobile Banking :

| Please ensure that Customer ID are same for all accounts | Sr No. | Customer Id | Branch Name (in Block letter) | 13 digits Account Number |
|--|--------|-------------|-------------------------------|--------------------------|
|  |        |             |                               |                          |
|  |        |             |                               |                          |
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|  |        |             |                               |                          |
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|  |        |             |                               |                          |

Download the Application from Google Play Store

“ Vardhaman Sahakari Bank Ltd App “

**Instructions :**

- Account holder can access their bank account through Mobile Banking where the mode of operation of bank account is single/Either or survivor/Anyone or Survivor
- I/We shall not share the logic password and/or Pin and/or Transaction password with anyone and it is My/Our responsibility to keep the same secret.
- I/We shall not share the logic password and/or Pin in any form on the mobile handset. The complete security of the above password is my/our responsibility

I/We have read and understood the instructions in the form that privacy policy as given on the website (www.svsbl.in) relating to Mobile Banking and SMS Banking. I/We sign here below as a token of my acceptance of the terms and condition as displayed on the Bank's website and in force & as may be amended from time to time by the Bank .

**Date :** \_\_\_\_\_ **Place :** \_\_\_\_\_

**(Signature of the customer)**

Received request for Mobile Banking

From Mr./Mrs./Ms. \_\_\_\_\_ for  
Account No. \_\_\_\_\_

Date of Request \_\_\_\_\_

Request Accepted by :  
**(Sign & Branch Stamp)**

I/We hereby have no objection in providing the facilities to above

\_\_\_\_\_  
**(Signature of 2<sup>nd</sup> holder)**

\_\_\_\_\_  
**(Signature of 3<sup>rd</sup> holder)**

In case of accounts, the facility is not permitted in case operating instruction is "Jointly" or "Former or Survivor".