


<p>महाराष्ट्र ग्रामीण बँक (भारत सरकार द्वारा स्थापित शेड्युल्ड बँक) पुरस्कृत बँक: बँक ऑफ महाराष्ट्र मुख्य कार्यालय: 35, जीवनश्री, सेक्टर - जी, टाऊन सेंटर, सिडको, औरंगाबाद - 431 003</p>		<p>MAHARASHTRA GRAMIN BANK (A Scheduled Bank established by Government of India) Sponsor Bank: Bank of Maharashtra Head Office. : 35, Jivanshree, Sector 'G', Town Centre, CIDCO, Aurangabad - 431 003</p>
<p>(0240) 2476139 to 42 Fax: 2476143</p>		<p>e mail: mgbhoit@gmail.com Visit: www.mahagramin.in</p>

APPLICATION FOR SEEKING INTERNET BANKING FACILITY

The Branch Manager,
Maharashtra Gramin Bank,
_____ Branch.

I / We wish to apply for Internet Banking facility and register myself as a user of MGB Internet Banking service.

Name of the Applicant : _____
(Surname) (First Name) (Middle Name)

Name of the user : _____
(in case of non-individual customer) (Surname) (First Name) (Middle Name)

Mailing Address: _____

City: _____ PINCODE _____ Phone / Mobile _____

Email address: _____

Date of Birth : _____ Place of birth : _____

Mother's Maiden Name: _____ CIF No: (11 digits) _____

Facilities requested : 1. View 2. Funds transfer 3. Own accounts - Intra bank 4. Interbank 5. All

Account details :

Sr.	Account Number (11 digits)	Branch Name	Mode of operation
1			
2			
3			
4			

Applicants Signature :

Date :

Place:

INTERNET BANKING DECLARATION / UNDERTAKING

I affirm, confirm and undertake that I have read and understood the terms and conditions for usage of the Internet Banking services offered by Maharashtra Gramin Bank and I accept the same.

I agree on my own behalf or as the mandate holder on behalf of the joint account holders and will adhere to the terms and conditions of opening, applying, availing, maintaining, operating for usage of the Internet Banking of Maharashtra Gramin Bank that may be enforced from time to time.

I hereby declare that all particulars and information given in this application form are true, correct, complete and up to date in all respects and I and other joint account holders have not withheld any information. I understand that certain particulars given by me or required by the operational guidelines governing Banking companies, I agree & undertake to provide any further information that Maharashtra Gramin Bank may require.

I agree and understand that Maharashtra Gramin Bank reserves the right to reject any application without providing any reason, to retain the application form and documents provided therewith and will not return the same to me.

General Information for User Awareness availing IB facility

In case of joint accounts all account holders are entitled to register as user. However, transactions would be permitted based on the account operation rights recorded. Internet Banking services will therefore be extended only to single or joint 'E' or 'S' accounts only.

As a matter of precaution customers may avoid using PCs with public access and shall maintain secrecy of user ID and password registered with the Bank. The password generic in nature, guessable or inferable, personal data such as name, address, telephone number, driving license, vehicle number, date of birth etc is best avoided. Similarly it is a good practice to commit the password to memory rather than writing it down somewhere.


Rules and regulations applicable to normal banking transactions in India will be applicable *mutatis mutandis* for the transaction executed through this site. It may not be safe to leave the computer unattended during a valid session since this might give access to your account information to others.

I have read the provisions above and accept them. I agree that the transactions executed through Internet Banking under my user ID and password will be binding on me. Transactions executed through a valid session using valid user id and password will be construed by the Bank to have emanated from the registered customer and will be binding on him / her.

Date:

Place:

Signature of customer

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MGB/

/

Date:

The In-Charge,
Internet Banking Cell, PMO
AURANGABAD

Dear Sir,

I/We _____

Understand ,am/are the Joint Holder(s) in Account Number(s) _____

I/We hereby authorize (Applicant)_____

To access/view the said accounts for and on my/our behalf.

I/We affirm, confirm and undertake that I/We have read and understood the Terms and conditions for usage of the Internet banking services offered by the Maharashtra Gramin bank and know that Bank reserves the right to modify the services offered or terms of Internet Banking services, and I/We agree to abide by the same.

I/We hereby state that should I/We wish to revoke the above authorization , I/We shall duly issue a letter of revocation to that effect and agree that until a fortnight after receipt of such revocation letter , the afore stated authorization shall hold good.

Yours faithfully,

1Name _____ Signature _____

2Name _____ Signature _____

For Branch use

The detail mentioned in this application form is/are verified & found to be correct. KYC norms are adhered to the accounts. Verified that the signatures and mode of operation as per records.

(SEAL)

Stamp & signature of AO of Branch with code and designation