

No.5049/50000/11-2014

Registered Office: 'Cosmos Tower', Plot No. 6, ICS Colony, University Road, Ganeshkhind, Shivajinagar, Pune-411007, Maharashtra INDIA Email: customercare@cosmosbank.in www.cosmosbank.com

Application to Add / Remove / Change Account on ATM Card

			Date:
Card Holder's Name			
ATM Card number:	Only enter f	first 6 and las	st 4 digits of card number
Existing Accounts	inked to the c	ard	
1) Primary			
2) Secondary 1			
3) Secondary 2			
I would like to a) Add New Account	nt to my card		
Account No.	A/c Type SB / CA	Account Single / Joint	Sign. of Account Holder(s)
b) Remove Accoun	it from my car	 rd	
Account No.	A/c Type SB / CA	A/c Type Account Sign of Account Holder(s)	
Card Holder's Sign			
		For Of	ffice Use Only
To The Manager ATM Cell Customer from our l			Date:
specimen signatur application for furth	re(s) of the i er processing	respective Ac	Account(s) to his/her ATM card. All above details an ecount holder(s) have been verified. Forwarding the
Name ————	-	· ·	