



Application for availing MOBILE BANKING Services
[Please read the terms & conditions carefully before filling up this form]

The Head of the Branch
 SyndicateBank
 _____ (Branch)
 _____ (City)

Dear Sir,

I/we wish to subscribe to the **Mobile Banking facility** offered by the Bank for my/our following Account/s for which the mode of operation of the account/s is **Single/Either or Survivor/Anyone or Survivor**. **I/we confirm that for the accounts mentioned below, none of the account holder/s is a minor.**

Name of the customer															
Mailing Address															
Date of Birth															
E-mail															
Bank Account Number (opened under same customer ID) (maximum 2 accounts allowed)										Mobile Number (Only one inland mobile number to be given) (10 digit)					

Declaration

I/we affirm, confirm and undertake that I/we have read and understood the Terms and conditions for usage of the Mobile Banking service of SyndicateBank as set forth in <http://www.syndicatebank.in> and that I/we agree to all the terms/conditions of applying/availing/maintaining/operating (as applicable) for usage of Mobile Banking service of SyndicateBank as may be in force from time to time. I/we further authorize SyndicateBank to debit my/our account/s towards any applicable charges for mobile banking service, payable currently or in future.

Place: _____
 Date: _____

 (Signature of the customer)

FOR BRANCH USE

It is confirmed that:

- The information provided by the applicant is verified and found correct.
- The Mobile banking registration process has been completed (**CIM78**) as per request.
- Mobile Banking facility is flagged positive in the Account Master (**CH021**) for all accounts opted for by the applicant.

Chief Manager / Sr. Branch Manager / Branch Manager

Please Note: No separate Data file need to be sent to CO:DIT. Do not send physical application or fax copy to CO:DIT. Please retain the application form at branch for record purpose.