

CUSTOMER INFORMATION / REQUEST FORM

Misc. / /

Date: ____/____/201

Customer's Account Number:

Customer ID:

Customer's Name: Mr. / Mrs. / Ms _____

Address change: (Only in case of change of address)

*New Address: _____

Old address: _____

A. Phone number change:

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B. Debit Card request:

C. Cheque book request/ No. of cheque leaves:

D. Pay-in-book request/ No. of leaves:

E. Statement of account request:

From _____ to _____

F. Internet banking:

G. Please activate my/ our above account:

H. Please issue balance certificate:

I. Stop payment request:

J. Any other service:(Please specify)

Date: _____

Customer's signature: _____

* Original Proof of Address required for change of address requests.

* Acceptable Address Proofs: Any Bank Account Statement / Utility Bill / Full Driving Licence / Council Tax Bill (not more than 3Months old). Bank does not accept internet printouts, credit card statement and mobile phone bill.

For Office use only

To Back Office, New Delhi:

Please do as mentioned above _____

Signature (CSA/ Officer)

Signature (Officer/ Manager)

Name:

Name: