



MULTI-STATE SCHEDULED BANK

Janata Bank Bhavan, Main Road, ICHALKARANJI - 416 115.

Internet Banking Application Form (For Individual / Joint Holders)

(All fields with * are mandatory.) To be filled in Capital Letters only

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www.kaijs.bank.in

The Branch Manager,

Date :

d	d	m	m	y	y	y	y
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Branch

Customer No.							
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Personal Details :

I/We wish to apply as under:

Customer ID No. is available on your passbook.
If you are not aware please contact at your nearest Branch.

Name of the Applicant / Mr. / Mrs.

Surname

Name

Middle Name

[illegible]

Mailing Address:*

[illegible]

City* _____ State* _____ Pin Code*

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Email Address*: _____

[illegible]

CKYC No.

Mobile No. of Authorised Signatory of Account *
(It should be same as registered with the bank)

Date of Birth: ____/____/____ Mothers maiden Name : _____ PAN No. _____
DD MM YYYY

Aadhar No. _____

Request for internet Banking

I/We wish to apply for Kallappaanna Awade Ichalkaranji Janata Sahakari Bank Ltd., Ichalkaranji Internet Banking facility. Please link my/our primary account and also link my/our other accounts given below.

Details of Accounts for which Internet Banking Services are to be activated

Order	Bank Account Number														A/C Operation Same as banking Operation	Access
Primary Account																☐ View Only
																☐ Transaction
1 st Account																☐ View Only
																☐ Transaction
2 nd Account																☐ View Only
																☐ Transaction
3 rd Account																☐ View Only
																☐ Transaction
4 th Account																☐ View Only
																☐ Transaction
5 th Account																☐ View Only
																☐ Transaction

(For additional Accounts please provide in separate sheet duly signed)

V=View only. T= Request for Account opening, Request for Term Deposit Account Opening, Request for Cheque Book, V = Covered Online Transfer / Schedule transfer of funds to own account, to Govt. A/c & third party A/c within the Bank and other Banks. Online transfer/Schedule transfer of funds from linked A/C.

I/We apply and would like to register for Internet Banking facility :

For inquiry, requests and financial transactions (Funds transfer between my/our linked accounts , to third party accounts maintained with the bank/other Banks utility payments, etc.)

In case of Joint accounts and HUF all signatories / members have read and agreed to abide by the terms and conditions governing the said Internet Banking facility and authorise below mentioned user/s to access and operate this account through internet Banking facility.

The applicants are required to sign the below mentioned mandate for the joint account holder(s). Above Terms and conditions read, understood and agreed including the interpretation of rules, **risk, limits, charges & other conditions will be applicable as updated from time to time under the heading "Terms and Conditions" for Internet Banking on Bank's website www.kaijs.bank.in**

Statement if required on e-mail ID (YES/No) _____

Joint Holder Details*

Sr. No.	Name of the User	Joint Account No.	Level of A/c Operation *	Birth Date	Place of Birth	Mother's Maiden Name

In case of joint account operation will be allowed to one authorised A/C holders as mentioned in Annexure - I.

Joint Holder Mandate

I/We hereby authorise the other joint holders to have View/Transaction access for the said account on my/our behalf. I/We further agree that since the mode of operation of our Account is joint (one initiator and all other approvers), the transaction/s initiated by any one holder will have to be approved by other joint holder/s. I/We further affirm, confirm and undertake that I/we will be responsible for any action by any of us using Internet Banking facility. I/We hereby state that should I/We wish to change/revoke the above authorization, I/we shall duly submit a change mandate to that effect to the bank. **I / We hereby agree that till 10 (ten) working days, after receipt of such change mandate existing account operations shall be hold good.**

Declaration

Terms & Conditions of techno-based services of the bank

I/We am /are interested in all /few techno-based services of the bank. I/We am /are interested Confirm and undertake that we have read and understood the Terms and Conditions applicable for usage of Kallappanna Awade Ichalkaranji Janata Sahakari Bank Ltd., Ichalkaranji Internet Banking, Mobile Banking and Phone Banking services.

I/We are aware that the usage of Kallappanna Awade Ichalkaranji Janata Sahakari Bank Ltd., Ichalkaranji Internet Banking, Mobile Banking and or Phone Banking- is governed by the terms and conditions. I/We have read, understood Terms & Conditions, Privacy Policy and Disclaimer which are displayed on website : www.kaijs.bank.in for availing all or any one of the facility and accept them and they are binding on me/us.

We hereby declare that all particulars and information given in this application form (and all documents referred or provided there with) are true, correct, complete and up-to-date in all respects and we and other authorised account users have not withheld any information from bank. We understand that certain particulars given by us are required by the operational guidelines governing banking companies. We agree and undertake to provide any further information that of Kallappanna Awade Ichalkaranji Janata Sahakari Bank Ltd., Ichalkaranji may require.

I/We here by declare that, I/We are solely responsible for any loss of amount due to sharing of Password/OTP/PIN of CVV by me/us.

We do hereby indemnify and forever **keep indemnified the Bank and its successors and assignees from and against all claims, actions, penalties** that may be made, suffered or incurred by reason of non observance of any of the terms and conditions mentioned therein.

I/We agree and understand that Kallappanna Awade Ichalkaranji Janata Sahakari Bank Ltd., Ichalkaranji reserves the right to reject my/our application without assigning any reason and or can terminate the facilities already given without assigning any reason.

Place: _____

Date : _____

1. Signature

2. Signature

3. Signature

4. Signature

To be signed by first Account Holder / Proprietor

1) Name of Authorised Person _____

User ID : _____

(Short name suggestion for Login ID only in case of Joint Accounts)

Signature: _____

To be signed by all Joint Account Holders Consenting Party for above linked Accounts & authorising the above person to operate the A/C's.

2) Name _____

User ID : _____

(Short name suggestion for Login ID)

Mobile No.: _____

E-mail: _____

Address.: _____

Signature: _____

4) Name _____

User ID : _____

(Short name suggestion for Login ID)

Mobile No.: _____

E-mail: _____

Address.: _____

Signature: _____

3) Name _____

User ID : _____

(Short name suggestion for Login ID)

Mobile No.: _____

E-mail: _____

Address.: _____

Signature: _____

5) Name _____

User ID : _____

(Short name suggestion for Login ID)

Mobile No.: _____

E-mail: _____

Address.: _____

Signature: _____

For Detail Terms and Conditions please visit our website: www.kaijs.bank.in

FOR OFFICE USE ONLY

(To be certified by branch only)

The details mentioned in the application form including signature of the customer and mode of operation of the account/s is/are verified and found correct. The KYC norms are also adhered to while opening the account. The application is sanctioned and forwarded to Internet Banking Cell, Data Center - Jaysingpur.

Place: _____

Date: _____

**Signature of the Branch Manager/Authorised Officer
Branch Seal and Name of Authorised Person**

Acknowledgement by Branch to Applicant

Kallappanna Awade Ichalkaranji Janata Sahakari Bank Ltd. (Multi-state Scheduled Bank)

Received Request Form of Internet Banking Facility from Mr./Mrs./_____

_____ On / / . to our branch with all required Details and Documents

FOR USE OF INTERNET BANKING CELL / DATA CENTER

Application Accepted/ Rejected/ Pin/ TPIN issued

<u>Activity</u>	<u>Signature of Authorised Officials</u>	
	Maker	Checker
Application received Date		
Application Registration Date		
PIN Issued date		
TPIN issued Date		
Welcome Letter Issued Date		

Date : _____

Signature of Internet Banking Cell / Data Incharge


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