

I/we declare that I/we do not have any account / enjoy credit facility with any other bank.

I/we declare that I/we have account / enjoy credit facility with following bank (Please Provide Details)

Bank / Branch	Address of Bank Branch	Type of Facility	Amount (Limit)	Account No.

For Partnership Firm Only

Dear Sir,

We beg to inform you that we, the under signed are the proprietor in the firm of M/s _____ Which has dealing with your Bank, We jointly and severly agree and accept responsible to the Bank for the liabilities of the firm with the Bank.

The Bank may recover its claims from the estate of any or all the Partners of the firm.

Whenever any change occurs in our partnership, We agree and accept to inform the Bank of the same in writing and our individual responsibility to the Bank will continue until all our liabilities to the bank are discharged.

Your's Faith Fully

1. _____

2. _____

3. _____

4. _____

5. _____

(Personal signatures of all partners)

Date _____

Place _____

Partnership Letter

To,

The Ahmedabad Mercantile Co-op Bank,

_____ Branch

Ahmedabad.

Date:

Dear Sir,

As the firm of _____ carrying on business as

_____ at _____ and elsewhere (therein after referred to us 'the firm') have or desire to have dealing with the Ahmedabad Mercantile Co-Op Bank Ltd. We hereby inform you that we the undersigned are partners of the said firm and each of us has full unrestricted authority to sign on behalf of and to bind the firm. We also give below the names of our other partner, if any who also have unrestricted authority to bind the firm and who have not, owing to absence or for other reasons, signed this firm.

We the partners who have signed and the partners who have not signed if any are jointly and severally are responsible to the Bank for all the liabilities of the firm to the Bank, The Bank may recover its claims from the estate of any or all the partners of the firm and in case any partner is member of a joint family from the estate of the joint family and the interest therein of every copartner of the family.

Whenever any change occurs in the constitution of the firm we (partners)undertake immediately to inform the bank in writing and our individual responsibility and that of our respective estate of the Bank will continue until we receive from the Bank acknowledgment of the change our constitution and until all our liability to the Bank prior the aforesaid charge are discharged.

We (the partners) also undertake that all acts of the firm purporting to be done on behalf of the firm before the Bank shall have received notice of any change in the constitution of the firm shall be binding on the firm and each of us and our respective estates until all liabilities in respect of such acts shall have been discharged

We declare the partnership firm is registered/unregistered

Yours faithfully,

Full name of Partners	Individual Signatures	Signatures on behalf of the firm

For Proprietorship Firm Only

As the firm of M/s. _____

have dealing with your bank, I beg to inform you, I the under signed and the holder of the said firm, I am responsible to the bank for the liabilities of the firm with bank, The Bank may recover its claim from my estate.

Whenever any charges occurs in the constitution of the said firm, I undertake to inform the bank of the same in writing and my responsibility to the Bank will continue till I receive form the Bank an acknowledgement of that letter and until my liabilities to the Bank are discharged.

Date : _____

Place : _____

Yours Faithfully

(Personal signature of the Proprietor of the firm)

Terms & Conditions:

I / we have read, understood and abide by banks rules for conduct of the accounts / services/products & charges.

(1) I/we hereby agree with the terms and condition of the service and it is acceptable to me/us,

(1) Interest will be credited as per RBI directives from time to time.

(2) Bank will not request for "stop payment" instruction, but the bank will not be responsible and liable if such cheque being paid inadvertently.

(3) Bank, is empowered to refuse payment if signature does not match with the specimen.

(4) I/we undertake to keep the bank informed about change in my residence/occupation address.

(5) Please issue cheque book and recover applicable charges from my account as per banks norms.

(6) I/we also agree to maintain (the minimum / quarterly average balance which bank may prescribe as the minimum / quarterly average balance to be maintained to avail the facilities and agree to pay the charges if the said balance is not maintained and any other charges stipulated by bank.

(7) I/we understand that any change in this regard will be noticed by the Bank on its website www.amcobank.com and also will be displayed on the notice board of the branches (one month in advance).

(8) I/we shall fill up separate pay-in-slips prescribed by bank for various fixed deposit schemes, I/we understand that the time deposit shall be under auto - renewal scheme of the bank unless otherwise specified by me / us.

(9) I/we authorize bank to make reference and enquiries as may be deemed necessary in their discretion with regard to the information furnished in this application. Bank is empowered to exchange, share or part with all the information data or documents relating to me / our application Inter se amount themselves or to other bank / financial institutions / agencies / person as many be deemed necessary or appropriate or as may be required for processing of such information / data or for furnishing of the processed information / products of other bank / financial institutions / credit bureaus / agencies / users registered with such agencies.

(10) Account in the name of minor can be opened by his guardian subject to birth date verification of minor.

(11) If any account becomes dormant due to non-operation for two continuous years, bank is entitled to recover prescribed charges from my account.

(12) Bank is entitled to close my account after giving 7 days notice, if bank is not satisfied by the conduct of operations in the account

(II) For RuPay Debit Card cum ATM card:

(1) I/we accept full responsibility for my /our RuPay Debit Card and agree not to make any claims against Amco Bank in respect thereto.

(2) I/we have read and understood the terms and conditions governing the usage of RuPay Debit Card, I/we accept to be bound by the said terms and conditions and to any changes from time to time by the Amco Bank, I/we authorised Amco Bank to Issue a RuPay Debit Card cum ATM card to the person/s as name mentioned in application of a/c opening form, I/we unconditionally and irrevocably authorize bank to debit my / our account annually for Debit Card charges / fees if any stipulated by the bank.

(3) I/we understand and undertake that the usage of the RuPay Debit Card shall be strictly in accordance with the exchange control regulations and In event of any failure to do so. I/we will be liable for action under the Foreign Exchange Management Act (FEMA) 1999 and the amendments thereof stipulated by RBI from time to time.

(HI) Mobile banking declaration:

I/we agree & abide by the terms and conditions of Mobile Banking available on website of bank www.amcobank.com and agree that the bank shall not be held Hable and absolved from liabilities whatsoever for loss to customer arising out of any reasons beyond the control of the bank including technology failure of network of any service provider and / or the bank's system and / or any breakdown, interruption, suspension or failure of the telecommunication equipment of the customer or the bank.

I/we agree that

1. To download the Mobile Banking Application from the play store of the mobile OS vendor.

2. That transaction initiated through mobile banking application ere irrevocable, bank shall not entertain any request for revocation of transaction or stop payment request for transaction initiated through mobile banking as the transactions are completely instantaneous and are incapable of being reversed.

3. Not to use mobile banking channel for transfer of funds for illegal activities.

4. To be responsible for the safe custody and security of mobile banking application. Downloaded on our mobile phones and Immediately inform the bank about loss or theft of mobile phone for disabling of mobile banking services to prevent unauthorized usage.

5. To NOT share the login password and MPIN/TPIN with anyone, including bank's Staff/Associate / Representative.

6. To operate within the maximum transaction limit(s) permitted by the bank for mobile banking from time to time.

7. To be responsible for any loss caused arising out of usage of mobile banking.

8. To accept all changes/modifications / additions/removals of any of the extant terms and conditions governing mobile banking service.

Customer Signature 1. _____

2. _____

3. _____

4. _____

5. _____

DA1 ACKNOWLEDGMENT

Account No _____ Name of Depositor _____

Nomination in favour of _____ Dated _____ has been registered in the books of the Bank. Kindly note that in case of nominee being a non - resident indian the repatriation of funds will be subject to the guidelines of RBI

Place :

Date :

Branch Manager / Officer

