

Karnataka Gramin Bank

(A Scheduled Bank, Estd by Govt.of India, Sponsored by Canara Bank)

CUSTOMER REQUEST LETTER[For Savings & Current A/c (Proprietorship) Customers only]

From:	To: The Branch Manager Karnataka Gramin Bank Branch
Dear Sir/Madam	
I/We request you to provide me/us the service/s ticke my account.	ed in the box below. You can debit charges as applicable to
My A/c NoPhone / Mobile No	Customer ID :Emil ID :
Kindly update my Permanent account Number in your proof of PAN) Please tick in the appropriate box.	records: PAN 1 2 3 4 5 6 7 8 9 10 (enclose
 CHEQUE BOOK REQUEST: a.	ook.
the same and issue new Cheque Book. b. I/We have issued a Cheque No	aves from to Please stop payment of favouring Please stop payment of the cheque.
a. □ I/We have remitted cash amounting to ₹ Amount not consider the Cheque No Amount not consider the Cheque No Drawee Bank and Branch Credit not received in my/our account. Please - Returned cheque not received. Plese verify a color of ₹ remitted beneficiary's account. Please verify. d. □ An amount of ₹ remitted on Bank/branch for credit of my/our A/c No 4. □ PASS BOOK/PASS SHEET: a. □ Pass Book- I/We have not received Pass book.	at branch for credit of A/c No. redited/short credited. Please verify amount ₹ Date of Deposit e verify and credit. and return the cheque. on (date) through RTGS/NEFT not credited to (date) through RTGS/NEFT by not credited. Please verify and credit. k for new account. Please issue pass book.
c. Pass Sheet – Please issue duplicate pass sheed. Duplicate Pass Sheet – Please issue Duplicate Pass Sheet – Please Sheet	the pass sheet – Weekly / Fortnightly / Periodicity – Monthly /
a. Please update the contact information (resider	nce/office) in your records. I/We am/are enclosing proof of my/our City PIN
	- Cut here ——————————————————————————————————

6.	FIXED DEPOSIT / KAMADHENU DEPOSIT / RECURRING DEPOSITS:		
	Account No Date of Deposit :		
	a. Deposit Receipt not received		
	b. Tenure of the Deposit wrongly mentioned. Correct Tenure: months/years.		
	c. Rate of Interest not correctly applied / Preferential rate not given.		
	d. Periodical FD interest not credited to account / pay order not received.		
	e. Nomination not registered / not cancelled / variation as requested not effected in my SB/CA/FD/KD/RD A/c No. f. Periodical FD interest not credited to account / pay order not received		
7.	TAX DEDUCTION AT SOURCE:		
/.	a. TDS Certificate Request for the FY		
	b. Interest Certificate request for the FY		
	c. TDS Cetificate not received for the FY		
	d. Torm 15H/15G submitted at branch on but tax deducted.		
	e. Mismatch in Tax deducted and Tax remitted. Please verify.		
8.	STANDING INSTRUCTIONS:		
	Following standing instructions not executed: Instructions date: Amount ₹ Periodicity		
	Instructions date: Amount ₹ Periodicity From: A/c No. of To: A/c No. of		
9.			
	ACCOUNT MODIFICATION: Account No: Name: Name:		
	ar Documents Submitted for the compliance. The details not aparated.		
	 b. Date of Birth not updated though proof of Date of Birth submitted on c. Conversion of individual account into joint account not made. 		
	d. Status of account not changed from Minor to Major.		
	e. Addition / Deletion of Joint Account holder not made.		
	f. Mode of operation wrongly mentioned from the one mentioned in the A/c opening form.		
10.	DEBIT CARD:		
	a. I have filled up the form but not received the Card. Please check and issue the card		
	b. Lost Card – My Debit Card is lost. The 16 digit Card No. is Please hot List the Card. (Please fill up separate appln.form for obtaining new card).		
	c. Card expired. New Card not received.		
	d. ATM – Cash not dispensed/partly dispensed – ATM ID transaction date Amount		
	₹ (Please attach Transaction Slip).		
11.	INTERNET BANKING/MOBILE BANKING (Strike out which is not applicable)		
	a. I have filled up the form but not yet received the User ID for Internet Banking/Mobile Banking. Please issue.		
	 b. My User Profile is blocked. Please unlock. c. I have forgotten my User ID and Password for Internet Banking / Mobile Banking. Please reissue. 		
12.	SMS REGISTRATION: MOBILE NO:		
14.	a. Modification		
	b. Addition		
	c. Deletion.		
13.	OTHERS (Please specify):		
I.	DECLARATION , holding the afore-mentioned account with Karnataka Gramin hereby declare that,		
Bank	hereby declare that,		
	present mobile No is and the same may be updated in the bank's records for Mobile Banking,		
	nding any communication related to my above account, as well as transaction advises. I also authorise the bank to contact me on the above entioned number for doing verification call backs or checks to confirm the veracity of any transaction, as deemed fit by the bank. I confirm that the		
sa	d mobile number is held by me and is not in use by any other third party and I undertake that I shall duly and promptly inform the bank if and		
	en my mobile number changes. Nave read and understood the document containing the "Terms and Conditions" & "Disclaimer Clauses" governing Karnataka Gramin Bank's Internet		
Ва	nking services available in Bank's Internet Banking portal (https://netbanking.pragathikrishnabank.com) accessed through Bank's official website		
	www.karnatakagraminbank.com and I accept the same. Further, I also agree that the transaction and the requests executed in the above mentioned counts through Internet Banking under my user ID and password will be legally binding on me and I am responsible for maintenance of secrecy and		
со	nfidentiality of the information passed on to me by the Bank through Internet/Mobile/Mail/Telephone.		
3. I have read, understood and agree to be bound by the Terms and conditions to various products and services including ATM Cards, Internet Banking, as displayed on www.karnatakagraminbank.com / available at branches. I agree that the Bank may debit service charges plus taxes to my account			
	erever applicable.		
Place			
Date:	Signature of the Account Holder/s ———————————————————————————————————		
	ACKNOWLEDGEMENT		
We acknowledge having received customer request letter from (full name) A/c			
No	acknowledge having received customer request letter from (full name) A/c The signature is verified & found correct.		
SI.No	Please affix date seal with time Signature of the Officer / Manager		
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