CITY UNION BANK LIMITED		
Personal Banking - Internet Banking / Mobile Banking / SMS Pull Registration Form		
Individuals / Joint / Sole Proprietorship Account		
То	(All fields marked with * are mandatory to be filled) Date:	
The Branch Mana		
	, Branch	
Name of the Applicant Mr/ Ms, S/o D/o, W/o		
Address :	New Address	
PIN:	Ph: Ph	
FAX		
* E-Mail ID:(Must Date of Birth:		
For Mobile/ S		
	Unique Mobile Number to be registered for the above mentioned customer ID	
	I wish to avail the SMS Banking Alert Facility. Kindly alert me if the amount is debited more than Rs from the accounts linked to the above Customer ID. NOTE: Mobile Banking only for Saving Account Holders	
	I wish to avail Mobile Banking Facility for the above mentioned Customer ID for the above Mobile Number. Note: To avail Mobile Banking Facility customer should have GPRS/Java enabled mobile phones	
	(Java version MIDP 2.0 and above) using both SMS & GPRS modes.	
	I wish to avail SMS Banking Pull Services for the Above Mobile Number	
	I do not remember the MPIN kindly resend the same for 📃 Mobile Banking Application 📃 SMS Banking Pull Services	
For Net Bank	ting	
	ne of the following :	
	I wish to apply for City Union Bank Internet Banking facility with fund Transfer 🛛 🔛 Without Fund Transfer	
	I have a Net Banking for the above Customer ID but do not remember the following. Kindly resend me the same.	
	Login ID Login Password Transaction Password	
	I have an Internet Banking User ID. Pls extend the transaction facility for the above mentioned customer ID.	
In Case of joint Ac	counts the applicant is required to obtain the required mandate from the joint account holder(s)	
-	Ltd., Account holders can access their Bank accounts through City Union Bank Internet Banking (www.onlinecub.net) only	
	of operation of City Union Bank Account is Single / Either or Survivor / any one of the survivor.	
Declaration :		
I confirm that I am the sole account holder or I have the required mandate from the joined account holder(s) to singly operate the Account .I will keep the SIM card and my mobile / phone in my possession at all times .I will inform the Bank immediately incase my mobile or SIM card is lost . And I understood that I shall be solely responsible for all the transactions happened through my mobile . I have read and understood the Terms and Conditions (a copy of which I am in possession of) relating to opening of an account and various services including but not limited to (a) MobileBanking/ SMS Alert Service (b) NetBanking (c) BillPay Facility. I accept and agree to be bound by the said Terms and Conditions .		
I affirm, confirm and undertake that I have read and understood the Terms and Conditions for usage of the Internet Banking, service of City Union Bank Limited and I am aware of Charges Applicable for the Service, as set forth in www.onlinecub.net, and that I agree on my own behalf, or as the mandate holder on behalf of the joint account holders, and will adhere to all the terms/conditions of opening/ applying/ availing/ maintaining/ operating (as applicable) for usage of the Internet Banking service of City Union Bank Limited as may be in force from time to time. I further authorize City Union Bank Limited to debit my Account(s) towards any Charges. I declare that all the particulars and information given in this application form (and all documents referred or provided therewith) are true, correct, complete and up-to date in all respects and I, and other joint accountholders have not withheld any information. I understand that City Union Bank Limited. I agree and understand that City Union Bank Limited reserve the right to reject any application without provide any further information that City Union Bank Limited. I agree and understand that City Union Bank Limited reserve the right to reject any application without providing any reason. I agree and understand that City Union Bank Limited reserve the right to retain the application forms, and the documents provided therewith, including photographs, and will not return the same to me.		
I agree and understand that I have to complete further applications for specific liability products/services from City Union Bank Limited, as prescribed from time to time, and that such further applications shall be regarded as an integral part of this application (and vice versa), and that unless otherwise disclosed in such further forms as prescribed, the particulars and information set forth herein as well as the documents referred or provided herewith are true, correct, complete and up-to-date in all respects. I agree and understand that such further applications will require incorporation of the application form number, and/or such details as City Union Bank Limited may prescribe, to facilitate data management I agree that the bank will not be held liable / responsible for any loss or liability occurred on account of breach of security / denial of service etc., because of hacking / other technological failure . Once my request for OnlineCUB account is accepted and my user ID is activated by the bank, all my linked accounts (including any new accounts that may be opened with my customer ID subsequent to the issue of OnlineCUB account User ID and password) will be covered under the rules governed under OnlineCUB account from time to time. I hereby confirm that the above mentioned address matches with the address previously given to the bank. Otherwise I will give change of address request to the branch.		
Date:	Signature:	
Date.		

For office use only		
The request of C	ustomer (NAME) for the services requested may be enabled.	
CUSTOMER ID (BP ID) IS :		
2) Signatures of Joint holders have been verified and found Correct		
3) The Customer ID and the above signature have been verified and found correct and the accounts linked with the above Customer ID		
	to this customer only.	
4) The above ad	dress given by the customer matches with the record.	
5) The account is not a minor account.		
6) For SMS Banking we have enabled the SMS Banking flag in CBS, entered the customer Mobile Number correctly and the alert amount.		
Date :	Signature of the Branch Manager.	
	MANDATE FORM FOR JOINT ACCOUNT HOLDERS	
	Customer ID	
From		
Mr./Ms		
То		
To City Union Bank I	td	
	Branch.	
Dear Sir,		
-	rent Account/Term Deposit Account Noheld in the joint names of Mr/Ms and	
Mr / MS	atbranch.	
I/We hereby auth	norise Mr/Ms(Name of the applicant for the services) to avail the OnlineCUB / SMS Alert	
/ Mobile Banking Services in respect of the above Customer ID and the accounts linked to the Customer ID. I/We have read and		
understood the r	ules, terms and conditions for availing the OnlineCUB / SMS Alert / Mobile Banking Services. I/We undertake to ratify	
and confirm all a	nd whatever Mr/Msdoes or causes to do through OnlineCUB / SMS Alert /	
	ervices. This authority shall continue to be in force until I/any one of us revoke(s) this mandate by a notice in writing	
delivered to you.		
Yours faithfully, 1	Name in Block Letters	
2	Name in Block Letters	
3	Name in Block Letters	
	(Signatures of Joint a/c holder/s)	