



16. Change my signature in above mentioned account:

From	OLD SIGNATURE	To	NEW SIGNATURE

17. I/we request to close above account and pay the balance by: Cash/ Credit to account no.

#### FIXED DEPOSIT/PPF ACCOUNT RELATED SERVICES

18. Please change the tenure of my /our Fixed deposit A/c No.  to

19. Reissue Term Deposit advice for A/C number:

20. Please issue TDS/Interest certificate for Account Number/s:

#### OTHER ACCOUNT RELATED SERVICES

21. Passbook required: Yes / No [If No, Request for statement of account through e-mail id.

22. Request to Issue Duplicate Passbook for the Account Number:

23. Request to activate Phone Banking/Mobile Banking services in the above-mentioned account.

24. Standing instruction: Please transfer Rs.  to RD/Loan/SB A/c No.

Starting from date  Daily/Monthly/End of Month

25. Setup Auto-sweep facility - Saving Plus Threshold amount: Rs.

Sweep time: **Daily/Weekly/Monthly/Bi-Monthly/Quarterly/Half yearly/Yearly/Fortnightly.**

Under reverse sweep facility the MOD (Multi-option deposit) to be broken by: Last in First Out/First in Last Out

#### NOMINATION

26. Nomination to be modified in my account mentioned above: **New/Change/Delete**

*(Please fill and attach DA-1 form for new nomination, DA-2 form to delete nomination and DA-3 form to change nomination)*

27. Nomination to be modified: [Add/Modify] in the scheme APY/PMJJBY/PMSBY/PPF

#### APY RELATED SERVICES

28. Request to update the pension amount for APY from Rs.  to 1000/2000/3000/4000/5000

*I hereby authorize the bank to debit my above mentioned bank account till the age of 60 for making payment under APY as applicable based on my age and the Pension Amounts elected by me.*

#### CHEQUE RELATED SERVICES

29. Cheque book facility: Please provide cheque book facility in my account number mentioned above.

30. New personalized cheque book request: Number of leaflets: 10/20/25/50/100

Name on cheque:

Address to be delivered to: **Permanent/Correspondence/New**

31. Request to stop (number of cheques) Cheque number listed below/attached

Starting from  ending at  or Cheque number:

Cheque number:  Cheque number:

Cheque number:  Cheque number:

#### DEBIT CARD SERVICES

32. ATM card issuance (Charges will be deducted as applicable): **New/Replace\***

Address to be delivered to: Permanent/Correspondence

Request for New Card:  Personalized Card  Non Personalized Card, Type of Card: **Rupay / VISA**

Name on card:

- \* Reason for replacement – Card lost/Damage/Card Expired

33. Block / Unblock debit card number:

#### INTERNET BANKING SERVICES

34. Activate Internet banking in the above mentioned account.

Reference Number (for official use only):

35. Request to: Reactivate the username/Re-issue login password/Reset the INB profile password Date of Birth:

36. Internet Banking rights modification: **Full Transaction rights/Limited Transaction rights**

#### PENSION SERVICES

37. I wish to submit Life Certificate for PPO no:

38. Please issue Pension Certificate/Slip for PPO no:  for the Month  Year

39. Please issue Form 16 for PPO no:

40. Pensioners Grievances (Pension not credited/Life Certificate not updated)

#### LOCKER SERVICES

41. Request for Allotment of Locker: (Size): Small  Medium  Large

42. Request to add Nomination to Locker number:

(Duly filled in nomination form is to be attached)

43. Request for Locker Conversion from Single to Joint: **Locker No.**

Name of Joint Holder:

Account no. of Joint Holder:

44. Request for closure (Surrender) of Locker No:  Bearing Key No:

45. Request for break open of Locker No:

46. I hereby Authorize the bank to Search and Download the CKYC details from CERSAI, from my identification details.

47. I hereby Declare that there is no other change in my Address or KYC details , except the one as mentioned above.

#### ADDITION/DELETION OF A/C HOLDERS

Add / Delete..... Existing: Yes  No  (if Yes) A/c No.

Relation with A/c holder: .....

Revised Mode of Operation:

Self  Either or Survivor  Former or Survivor  Later or Survivor  Jointly  As per mandate

*I have read, understood and agree to the Terms and Conditions of various products and services including SMS alerts, Debit card and Internet Banking. I accept and agree to be bounded by the Terms and Conditions as displayed on <https://www.bankofmaharashtra.in>. I agree that the bank may debit service charges plus taxes to my account whenever applicable. I wish to seed this account with NPCI mapper to enable me to receive Direct Benefit Transfer (DBT) including LPG Subsidy from Govt of India (GOI) in this account.*

Kindly provide the number of Requests submitted (count and enter number of ticks in the checkboxes)\*:

First account holder's signature

Second account holder's signature

Signature of Branch Official  
with SS No.

#### ACKNOWLEDGEMENT

Date of Request Received: ..... Customer Name: .....

Employee Number: ..... Name of Branch Official: ..... Signature:.....

*Please note: Your request will be processed within 2 working days. Delivery of kits/cheque book etc. to your address will take between 7-15 working days (depending on delivery location)*

