

(सरकार के स्वामित्वाधीन अनुसूचित बैंक) (Scheduled Bank Owned by Government)

		Branch:		
AF	PLICATION FORM FOR INTER	RNET BANKING (Corporat	e)	
		CUSTOMER ID:		
I/We request you to re your branch -	gister my/our application for inte	ernet banking facility & link r	ny/our accounts with	
NAME OF THE ACCC	UNT/TITLE:			
ACCOUNT NO.:				
DATE OF INCORPOR	RATION/ ESTABLISHMENT:]		
	Sole Proprietorship	Partnership HUF	Society	
	Pvt. Ltd. Co.	Public Ltd. Co. 🔲 other	's	
I wish to have any of	the following CORPORATE-II	O* for internet banking (4 t	to 8 characters length	
1	2	3		
* CORPORATE-ID will b	e allotted to you subject to its avail	ability.		
I wish to have any of	the following User ID* for into	ernet banking (4 to 8 chara	acters length)	
1	2	3		
* User-ID will be allotted	to you subject to its availability. form of Corporate ID.User ID (e.g. Corp			
COMMUNICATION A	ADDRESS:			
City:	State:	Pin Code	:	
Telephone (O)	Telephone (R)	Fax No		
Email address:		Mobile:		

Declaration:

I/We affirm, confirm and undertake that I/we have read and understood the Terms and Conditions for usage of the Uttar Pradesh Gramin Bank e - Banking Corporate services and agree to them. I/We am/are aware that the usage of Uttar Pradesh Gramin Bank e-Banking Corporate is governed by the terms and conditions which are displayed on https://ibanking.upgb.bank.in the site maintained by Uttar Pradesh Gramin Bank and I/we have reviewed the contents of the same. Further, I/we accept the terms and conditions governing internet banking of Uttar Pradesh Gramin Bank applicable for bank accounts as displayed on bank's website. I/We accept and agree that I/we are aware of the contents of the terms and conditions and that all my/our rights and liabilities would be



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governed by the said terms and conditions by my/our act of accessing on https://ibanking.upgb.bank.in. I/we thereby agree to be subject to and comply with all the provisions of the terms and conditions which are incorporated by reference herein and deemed to be part of this application form to the same extent as if such provisions had been set forth in full herein. Necessary Resolution / Authorization is enclosed on the letterhead.

I/We do hereby agree and undertake to indemnify and keep indemnified Uttar Pradesh Gramin Bank, its successors and assigns, of, from against all losses, actions, costs, consequences, charges, expenses, claims and demands which the Bank may incur or sustain by any reason of or on account of the Bank being held liable for non-compliance of any of the terms and conditions of e-banking of Uttar Pradesh Gramin Bank by me/us.

Signature:

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1	Name & Designation		
2	Name & Designation		
3	Name & Designation		
4			
	Name & Designation		
Place:	Date:		
	For office use only		
Branch confirmation:			
We confirm that			
 We have verified the customer signs. All the accounts of the above customers. 	e are correct and the same are recorded in CBS also. gnatures and KYC with CBS. stomer have been linked to one Customer ID. smer ld for e-banking and granted e-banking facility to customer.		
Signature of Branch Manager:			
Name of Branch Manager:			
EC Number:			
Sol ID:			