



CUSTOMER REQUEST FORM (For e-SERVICES)

To,
The Br Head/Manager,
PRIME CO-OP BANK LTD.
Branch _____
Date: _____

Name of A/c. _____

Account No. _____ Customer ID _____

Phone no. _____ Mobile: _____ email Address _____

Please Tick [] The Appropriate Box

1. **MOBILE BANKING:**
 Please Activate Please Deactivate.
 Mobile No. (New) _____ Mobile No.(to be replaced, if any) _____

2. **INTERNET BANKING**
 Forgot Password Password Not Received

3. **EMAIL STATEMENT REGISTRATION**
 Please register my /our email ID _____ for e-statement

4. **DEBIT/ ATM CARD REQUEST:**
 a) **Card Reissue** **Card Block :**
 I/We request you to reissue / to block of Debit /ATM Card for the reason as follows,

<input type="checkbox"/> Card is Damaged	<input type="checkbox"/> Validity of card is already due.
<input type="checkbox"/> Card Lost/ Theft/ Misplaced	<input type="checkbox"/> Manufacturing Defect.
<input type="checkbox"/> Account Closed / To Surrender	<input type="checkbox"/> Incorrect Data On Card
<input type="checkbox"/> On Death Of Card Holder	<input type="checkbox"/> In case of Fraud

b) **PIN Reissue Request**

c) **To Update/Change Registered Mobile Number**
 Mobile No. (New) _____ Mobile No.(to be replaced, if any) _____

5. **TRANSACTION QUERY** My/our query is for ATM POS ECOM IMPS UPI

a) **Transaction Query for ATM/POS/ECOM :** Please credit my/our account for the reason _____

-----If transaction query kindly attached transaction slip-----

Date of Transaction	Transaction Time	Terminal ID No.	Location	Stan No.	Ret. Ref No.	Amount

b) Transaction Query for IMPS / UPI : Please credited my/our account for the reason _____

-----If transaction query kindly attached transaction slip-----

Date of Transaction	Transaction Time	Beneficiary Details (Name, Account & IFSC Code) / UPI ID	Ret. Ref No.	Amount

Signature of A/c. holder(s) _____

(Please provide a Signature of all account holders as per bank's record)

FOR OFFICE USE

By Branch

Request Received & Forwarded to Control Centre On: _____

- Card Destroyed Mobile Number /email ID updated in CBS Transaction Slip Collected (if any)

Sub Officer / Officer / Manager /Branch Head

Br.Seal & Date

Branch Head / AGM / CEO / Chairman

By Control Centre

Request Received On: _____ **Relevant Charges- Debited Rs.** _____ **for** _____

Request/Query is executed /solved on _____ **Remark if any:** _____

Action Taken

- Registered Mobile No. updated/changed PIN / Password reset/reissue
 Card Blocked/Reissued Transaction Query Resolved/Rejected

Entered By:

Authorised By:

Clerk/ Sub Officer / Officer / Manager

Departmental Head /Officer/Senior Manger/AGM