SHIVALIK SMALL FINANCE BANK

SERVICE REQUEST FORM		
1. Tran ID		
3. Checked by	<u> </u>	
Please fill in BLOCK (Capital) Letters only Application Date		
Branch Name Branch Code Product Code	亓	
CIF Number Account No.(SB/CA/CC/OD)		
Customer Name: Mr./Mrs./Ms./Dr./M/s		
Please fill up the required service request		
1. Change Personal/Contact Details(* Self attested- document for proof of address/PAN/Aadhaar etc is required where applicable)	_	
Mailing /Permanent Old Address	Щ	
Pin code Pin code		
City State State		
Mailing /Permanent New Address Please specify landmark		
Pin code Pin code		
City State State		
Change of Mobile Number New Mobile Number (Mention country code followed by your mobil	e number)	
Change of Landline Number New Landline Number STD/ISD Code		
Change of Email ID New Email ID		
*Update PAN *PAN TIME TO THE TOTAL T		
*Update Aadhar Number *Aadhaar Number		
*Update Date of Birth D D M M Y Y Y Y		
Reason for change (Please Specify)		
2. Debit card services (PAN or Form 60 is mandatory for issuance of Debit Card)		
A. Issue New Debit Card: Rupay Classic Rupay Platinum* (*available for select product only) Card Type: Insta Card Mention Card Reference Number:		
Personalized Card (Card would be delivered at communication address as per bank records)		
B. Permanent block/hotlist my existing Debit Card linked to A/c Number: New Card Variant Fraud Attempted/Committed	1	
3. Account Variants		
Please upgrade/downgrade my savings/current account		
Product Code SB Normal 1001 Gold 1012 Diamond 1013 Others		
Product Code CA Normal 1201 Gold 1204 Diamond 1205 Others		
4. Activate Inoperative/Dormant Account (Attach Photo, KYC & CIF)		
SB CA Account No.		
Please re-activate my account / Not being operated (Reason) 5. Request for Passbook Request for duplicate Passbook Statement of Account Tenure: From to		

6. Request for Cheque Book: Nos. of Cheque Leaves required: (Note: Savings Accounts: 15 cheque leaves per cheque book Current/Overdraft/Cash Credit Accounts: 30 cheque leaves per cheque book)
7. Stop Payment Request (Please attach separate list for multiple cheques)
Stop single cheque Stop multiple cheques No. of cheques
Cheque no. to Cheque No Amount
Date D D M M Y Y Y Y Payee Name
Reason for stop payment
8. Standing Instruction (For transfer of funds within Bank)
From A/C to A/C
Period (months/years) Amount Amount
Start date
9. Addition of Name in Account (Attach photo, KYC, CIF, AOF)
Please add Mr./Mrs./Ms
Relationship with Primary account Holder
10. Account transfer
a. Please Transfer my Account no. Branch.
Reason
11. Internet Banking PIN Mobile Banking PIN
I hereby request for generating Temporary PIN for registration to be delivered on my registered mobile number/ registered email id in bank records
12. Any other Request
Terms & Conditions
*Please ensure that all the details mentioned here are correct and up to date. Bank will not be responsible for any delays or non-delivery arising from incorrect information. E-mail ID and Mobile number provided above, shall reflect in all accounts under the above mentioned CIF number. Bank will send SMS alerts on the updated mobile number. Charges if any, for any new service mentioned will be debited to customers account. All terms and conditions as updated from time to time on the bank's website will be applicable.
Declaration
This is to certify that the above information is correct to the best of my knowledge and I/We permit the Bank to update the above details in its records for any further communication. I/We agree that I/We have read and understood the terms and conditions and agree to abide by the same.
Date Signature of 1st Applicant Signature of 2nd Applicant
Please sign Please sign
For Bank Use only Branch Code:
Request accepted by Request authorised by
(Maker Employed ID): (Checker) Employee ID: