

SMS ALERT FORM

To,

Alavi Co-Operative Bank Ltd.

Head Office: Wadi, Chokhandi.

Branches: Ajwa Road, Fatehgunj,

Vadodara

Dear Sir,

I/We request for SMS Alerts for my Saving / Current / CC account with your _____ Branch

Applicant Name																
Address																
Account Number (15 Digits)	<table><tr><td>3</td><td>2</td><td>2</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	3	2	2												
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Mobile Number (10 Digits)	<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>															
PAN Card Number	<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>															
E-mail (if available)																

General Conditions:-

1. The account number and customer details must be as per Bank records
2. SMS Mobile facility is provided for individual self accounts only.
3. If the customer changes their Mobile number, they have to register afresh using this application form.
4. I/We will not hold the bank responsibility for its any omission in sending SMS due to some reason.
5. SMS Alert charges are to be levied quarterly as per the instructions issued by BOD from time to time.

Declaration:-

I/We declare that I/We have read and understood the conditions governing Alavi Co-Operative Bank Ltd. I/We confirm that, I/We am/are the owner of the above Mobile number. I/We also note that applicable SMS alert charge by Alavi Co-operative Bank Ltd will be borne by me/us.

Date : / /20

Place : Vadodara

Applicant's Stamp & Signature

FOR OFFICE USE ONLY

Signature, Account Number and Name of the applicant verified and found correct as per Bank's records.
Recommended and permitted for providing SMS Alert facility.

Received by Clerk
Date: / /20

Verified by Officer / Manager

Record is updated in computer system.

Clerk
Date: / /20

Officer/Manager