



UCO BANK

UCO e-Banking Registration Form - Retail

Department of Information Technology
Internet Banking Cell
7th Floor, Head Office - 2
3 & 4 DD Block, Sector - 1
Salt Lake,
Kolkata 700 064
Tel : 1800 345 4567
Email : hoe_banking.calcutta@ucobank.co.in

Branch

Branch ID

Full Name

Date of Birth Sex
D D M M Y Y Y Y M F

Address for communication

City PIN

Phone Home

Office

Fax
(STD Code) (Phone #)

Mobile

Email

Choice of User-ID (Login ID) in the order of preference. (Bank has the right to allot any User-ID apart from the options given by the applicant in case of non availability of the same)

Choice # 1
Choice # 2
Choice # 3

I would like to avail of UCO e-Banking Services and would like to link the following accounts for the purpose.

I confirm that I am the sole account holder / I have the required mandate from the joint account holder of the linked accounts, in case of joint accounts**, to operate the accounts through UCO e-Banking Services. I also agree that the Bank may or may not link all the accounts, as the facility is available only for selected branches.

A/c Type	A/c No.	Mode of Operation	Name of Joint A/c holder	Customer ID (Branch use)	*We permit the applicant to access all these accounts through UCO e banking Services Signature of the joint A/c holder (s)

* In case of joint accounts the applicant needs to obtain mandate from the joint A/c holder(s) in the column mentioned above.

** Access through UCO Bank e-banking Services in respect of bank account will be permitted only where the mode of operation of the account is single/either or survivor/anyone or survivor.

Declaration:

I have read the "Terms and Conditions" and "Disclaimer" applicable to UCO e-Banking Services and I accept the same which are displayed on <http://www.ucobank.com> the site maintained by UCO Bank. Further, I also agree that the transactions and requests executed in the above mentioned account through UCO e-Banking under my User ID and password will be legally binding on me

I do hereby indemnify and forever keep indemnified the Bank and its successors and assigns of from and against any or all claims, actions, penalties, that may be made, suffered or incurred by the Bank by reason of non-compliance by me of any of the terms and conditions made therein.

Date:

Place:

Signature of Account Holder

Personal Information (Optional)

Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married			
Occupation	<input type="checkbox"/> Service	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Business	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student
	<input type="checkbox"/> Retired	<input type="checkbox"/> Others			
Annual Income	<input type="checkbox"/> 60000 - 1 Lac	<input type="checkbox"/> 1Lac - 2 Lac	<input type="checkbox"/> 2 Lac - 3 Lac		
	<input type="checkbox"/> 3 Lac - 5 Lac	<input type="checkbox"/> Above 5 Lac			
Residence Type	<input type="checkbox"/> Owned	<input type="checkbox"/> Rented	<input type="checkbox"/> Company provided	<input type="checkbox"/> Financed	<input type="checkbox"/> With parent
Residence Status	<input type="checkbox"/> Bungalow	<input type="checkbox"/> Flat	<input type="checkbox"/> Houses	<input type="checkbox"/> Others	
Vehicle Ownership	<input type="checkbox"/> Two Wheeler	<input type="checkbox"/> Car			

For Branch Use:

Application Sl. No. Date of Receipt:

We confirm having verified the signatures and mandates for the accounts including those of joint account holders. We also confirm that KYC norms have been complied with by the account holder(s) . Recommended for extending UCO e-Banking facilities.

Date:

Manager
PFM No.

Senior Manager
PFM No.

For Head Office, Internet Banking Cell Use:

User created on:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
User Enabled on:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Administrator	

PIN Mailer despatched on:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Authorized Signatory	

N.B. Please submit the filled up application form at the branch where you are maintaining your account.