



Branch : _____

**APPLICATION FORM FOR AVAILING AB INTERNET BANKING SERVICES
(INDIVIDUAL/JOINT /HUF® AND SOLE PROPRIETARY CONCERNS)**

USER INFORMATION (Please fill all columns)

I request you to register me for Internet Banking for operating my/the joint accounts. I enclose hereto the mandate(s) from the other joint account holder(s).

1. Account Number

2. Customer ID #

3. Full Name/Firm Name

4. Address for communication (Local/Abroad) - Passwords will be sent to this address

Door No. Street/Locality

City District/State Pin

5. Phone No. Mobile Landline

6. Email Id :

7. Date of Birth: 8. Place of Birth:

9. Sex: Male Female 10. Marital Status: Single Married

11. Date of Marriage (Optional) :

12. Mother's Maiden name:

13. Status of Applicant Resident Indian Non Resident Indian Foreigner

14. Facility Required View Only View and Tax Payment 3rd Party Funds Transfer*

Affix latest
Passport
photo here

@ HUF Customers to submit Hindu Undivided Family Letter for Internet Banking Services (RF 22) along with this application.
* User should opt the 3rd party transfer facility judiciously as this enables the customer to transfer funds from his account to the accounts of others in Andhra bank / other banks and also for utility payments /online shopping.
All Accounts linked to this customer Id will be accessible. If any a/c is opened with this Customer ID subsequently will also be accessible through net. Joint Accounts with Joint operation are not eligible for the AB Internet Banking Service

DECLARATION

I affirm, confirm and undertake that I have read and understood the terms and conditions for usage of AB Internet Banking Service, as set forth in www.andhrabank.in and I agree on my own behalf or as the mandate holder on behalf of the joint account holders, and will adhere to all the terms and conditions of opening / applying / availing / maintaining / operating (as applicable) for usage of the AB Internet Banking, as may be in force from time to time and Andhra Bank need not give me a separate notice. I authorize Andhra Bank to debit my account(s) towards charges for availing AB Internet Banking Service.

I agree and understand that it is my responsibility to inform the Bank any change in my address and if I fail to do so all communications may be sent by the Bank to the address stated in the application form and they would be deemed to be duly served

I agree that this application shall be treated as an authenticated request for generating User ID and PIN/Passwords for my Use. The User Id and PIN/Password mailers can be mailed to my address provided to the bank - at my own risk and responsibility. I declare and acknowledge that I have knowledge in operation/ use of Internet.

I declare that all the particulars and information given in this application form (and all documents referred or provided therewith) are true, correct complete and up-to-date in all respects and I, and other joint account holders have not withheld any information. I agree and undertake to provide further information that Andhra Bank may require.

I agree and understand that the Bank has a right to decline any transaction /all transactions without notice

I agree and understand that Andhra Bank reserves the right to reject any application or block or withdraw the AB Internet banking Service to any or all account(s) without assigning any reason. I authorize Andhra Bank or their agents to make references and enquiries which Andhra bank or its agents consider necessary in respect of or in relation to information in this application/further applications.

I accept that I will be responsible for keying in the correct account number(s) for the funds transfer request. In no case, Andhra Bank shall be liable or responsible for any erroneous transactions incurred arising out of or relating to the user (I), entering wrong account number(s) or for such other errors resulted from operation of the account by me wrongly and loss thereby. I understand that the validity of the beneficiary's account will be the sole responsibility of the User of third party funds transfer.

Date:
Place:

Signature of Applicant(s)



Branch : _____

NRI

I/we hereby declare that I/we am/are a non-resident Indian of Indian Nationality/origin. I/we confirm that all debits to my/our accounts for the purpose of investment in India and credits representing sale proceeds of investments in India are covered either by general or special permission of Reserve Bank of India. I/we further undertake and declare that any request made by me/us through AB Internet Banking Service for transfer of funds shall be for the approved bonafide transactions of domestic nature only and in any event such request will not be in contravention to the various regulations framed under Foreign Exchange Management Act 1999, Foreign Exchange Management (Deposit) Regulations 2000 and other rules and regulations laid down by Reserve Bank of India including Exchange Control Regulations.

Date: _____

Place: _____

Signature of Applicants(s)

JOINT HOLDER

I/we undersigned declare that the said First Joint holder has submitted an application for availing AB Internet Banking Service from your bank in respect of the account(s) applied in the application. I/we hereby authorize the said First Joint holder to view/access and conduct operations in the said account(s) for and on my/our behalf.

I/ we confirm/affirm and undertake that I/We have read and understood the terms and conditions for usage of the AB Internet Banking Services, as displayed on the website www.andhrabank.in and that I/we agree to abide by them.

Names of Joint Account Holder(s)

Signatures of Joint Account holder(s)

1. _____

2. _____

Note:For every addition of new Jt account, a separate annexure-II specified in Cir No.304 dt.15.12.09 is to be obtained.

FOR OFFICE USE ONLY

I have verified the application and the records and confirm that the applicant is

- > An Individual and sole holder of the account
- > An Individual and a First Joint holder of the joint account – operated not jointly but as:
 - Either or Survivor Former or Survivor Anyone Singly or Survivor
- > Applicant is the Sole Proprietor and holder of the account
- > Karta of HUF Account

I have also verified and I hereby confirm that KYC Norms are fulfilled completely for the account(s) linked to this customer Id mentioned in the application form. I have also verified the signature of the applicant with his specimen signature available on records and found in order.

Date: _____

Signature of Verifying Officer

Permitted to Register the Application Form for availing the AB Infi-Net Internet banking Services.

Date: _____

Signature of Branch Head

Receipt of Acknowledgement from the applicant

Acknowledgement-cum-User ID Intimation Slip (Individual Internet Account) received on _____

Date: _____

Signature of the applicant

-----TEAR HERE-----

ACKNOWLEDGEMENT (cut along and Handover to customer)

Andhra Bank

_____ Branch.

Acknowledgement cum User Id Intimation slip
(Individual Internet accounts)

Welcome to our AB-INFINET Internet Banking Services. This service can be availed at anytime and anywhere! we enumerate below a few important requirements for the best usage of Internet Banking Services.

- > You can browse the homepage of our website www.andhrabank.in from where a link is provided for availing Internet Banking Services.
- > You require User Id and Login Password to access the applied accounts through online.
- > Your User ID is

--	--	--	--	--	--	--	--

(Please fill 8 digit customer Id of the account applied by the customer for net facility)
- > You will receive login password through courier to your communication address.
- > Please collect your Transaction Password (if you have opted for Transaction facility) personally from our branch after you receive your Login password.
- > You can avail the Internet Banking services once you receive your Login password.
- > You can get acquainted with the usage of AB Internet Banking Service through the DEMO link available in our site.
- > Please feel free to contact us at 1800 425 1515 (Toll free) for any clarifications / information. I
- > It is our pleasure to receive your valuable suggestions for improving the AB Internet Banking Service further.

Date: _____

Signature of the Officer/Manager