



THE KALUPUR COMMERCIAL CO-OPERATIVE BANK LTD
(Schedule Bank)

Head Office, "Kalupur Bank Bhavan", Nr. Income Tax Circle, Ashram Road, Ahmedabad – 380014.

Email : info@kalupurbank.com

Website : www.kalupurbank.com

DETAILS OF BANK ACCOUNT TO BE LINKED WITH DEMAT ACCOUNT FOR ASBA APPLICATION THROUGH MOBILE APP

Dear Sir/Madam

Sub: My/Our Bank account no with your bank to be linked with my/our Demat account.

I/We _____ and _____ is/are Saving/Current bank account holder of your bank, **The Kalupur Commercial Co Op Bank Ltd.**, hereby provide you details of my/our Bank account details and details of my/our Demat account of the first holder of Saving/Current bank account. I/We understand the new rule prescribed by SEBI that no third party account is valid for blocking in ASBA system. Accordingly I/We have provided Demat client id with the name which is identical to first holder of Saving bank account holder.

I/We hereby provide you client master list of my Demat account (Not required in case of Demat Account with The Kalupur bank) with for your verification purpose.

Name of 1 st Holder		PAN no 1 st Holder	<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
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Mobile Register CIF	<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											Client Id	<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										

Terms and Conditions

(1)I/We have read and understood the General terms and conditions of service of the Bank and agree to be bound by the same including those that may be amended from time to time by the Bank.

(2)For ASBA facility, I/We authorise the Bank to block my/our account, hold funds/make payments towards ASBA issue applications made by me/us from time to time from my/our saving/Current bank account whether through branch or Net banking or any other channel offered by the Bank.

(3)I/We agree to maintain clear funds in the Saving Bank account for the purpose of ASBA issue application made from time to time by me/us. I/We understand that the said application is subject to rejection by the Bank in case of insufficient funds in the Saving/Current Account. I/We agree that no funds would be allowed to be withdrawn or utilized from the Saving bank account to the extent of the said issue application amount held in the said Saving bank accounts for the purpose of transferring funds to the issuer's account designated for this purpose within the timelines specified in the ASBA facility. I/We agree that incase of any rejection of my application due to insufficient fund, bank will not be responsible at any point of time.

(4)I/We further agree that the Bank may debit the said Saving account for the service charges and taxes as applicable from time to time.

(5)This Mobile application facility is only for applying in IPO/FPO/SME issue. For issue of NCD/Right issue this Mobile application facility will not be available.

Signatures. 1_____ 2_____ 3_____