



## THE MEGHALAYA CO-OPERATIVE APEX BANK LTD

### APPLICATION FOR MOBILE BANKING

Name of the Applicant (In block letters):

Mr. /Ms. /Mrs. \_\_\_\_\_  
(First Name) (Middle Name) (Last Name)

Applicant's A/c No: \_\_\_\_\_ Customer ID: \_\_\_\_\_  
(To be filled by Branch)

Mobile No.: +91- \_\_\_\_\_ Email address: \_\_\_\_\_

Instructions:

- I) In case of joint accounts, the applicant is required to obtain the attached mandate from the joint account holder(s).
- II) Account holders can access their bank accounts through MCAB Mobile Banking only where the mode of operation account is "Either or Survivor".
- III) Accounts which are operated by all or some of the account holders jointly will not be enabled for mobile banking services.

#### Declaration:

I affirm, confirm and undertake that I have read and understood the "Terms and Conditions for Mobile Banking Service" of The Meghalaya Co-operative Apex Bank Ltd. set forth in [www.megcab.com](http://www.megcab.com) and unconditionally accept them and as may be amended from time to time. I further authorise The Meghalaya Co-operative Apex Bank Ltd. to debit my account(s) towards any applicable charges for mobile banking service, payable currently or in future.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of the Customer)

#### FOR BRANCH USE ONLY

It is verified that the details of the account holder furnished above are found correct from the record and permitted to subscribe to Mobile Banking Service offered by the bank.

Signature of the verifying staff/Officer  
with Employee Code

Date: \_\_\_\_\_

Counter signed by  
with Employee Code

Date: \_\_\_\_\_

#### FOR HEAD OFFICE USE ONLY

Above details are checked and uploaded for enabling the account(s) for Mobile Banking Service requested by the customer.

\_\_\_\_\_  
Checked by  
with Employee Code

Date: \_\_\_\_\_

\_\_\_\_\_  
Uploaded by  
with Employee Code

Date: \_\_\_\_\_



## LETTER OF MANDATE FOR MOBILE BANKING FACILITIES

**(Applicable for linking Joint Bank Accounts with MCAB Mobile Banking)**

To,

Date: \_\_\_\_\_

The Branch Manager,  
The Meghalaya Co-operative Apex Bank Ltd,  
\_\_\_\_\_ Branch

Dear Sir/Madam,

I/We, \_\_\_\_\_

(Name of all Account holders)

the undersigned, am/are the joint account holder(s) of Bank Account No. \_\_\_\_\_ opened/established with The Meghalaya Co-operative Apex Bank Ltd. I/We hereby authorise \_\_\_\_\_ to view / access / transact on the said account(s) for and on my/our behalf through the MCAB Mobile Banking.

I/We affirm, confirm and undertake that I/we have read and understood the Terms and Conditions for usage of the MCAB Mobile Banking, as displayed on the website **www.megcab.com**, and that I/we agree to abide by them. I/We further authorise Meghalaya Co-operative Apex Bank to debit my/our account(s) towards any applicable charges for mobile banking service, payable currently or in future.

I/We hereby state that should I/we wish to revoke the above authorisation, I/we shall duly inform the Bank in writing in this regard. I/We hereby agree that until fifteen working days after receipt of such letter by the Bank, the authorisation as aforesaid shall hold good.

Yours faithfully,

Name:

Signature:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
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