



TTC Co-operative Bank Limited
Head Office, 6, Vasant Vihar Society, Near Mithakhali Six Road, Navarangpura
Ahmedabad – 380 009.

CUSTOMER REQUEST FORM

To,
The Branch Manager
Textile Traders Cooperative Bank Ltd.
_____ **Branch**

From : _____

Mobile No.: _____
Account No.: _____
Client ID: _____
Date: _____

Please Tick the Appropriate Box

1. CHANGE OF MAILING ADDRESS AS BELOW: (Please enclose proof of new address)

_____ City _____ Pin Code _____
2. Add / CHANGE OF MOBILE No.: _____
3. REGISTER / CHANGE OF E-mail Address: _____
4. ENROLLMENT OF ADDHAAR CARD: _____
5. ATM COMPLAIN
 A/c Debited Twice for Rs. _____
 Rs. _____ withdraw but not Received Cash & A/c is debited.
 I withdrew Rs. _____ but received Rs. _____
6. POS – COMPLAIN / E-COM COMPLAIN
 I Swiped ATM card at merchant POS Transaction Rs. _____
but Transaction Declined and Amount debited in A/c. (Transaction Slip attached)
 I have made Transaction through my Card Number (Only Last Four Digit) _____ in E-Commerce
website but transaction declined and amount Rs. _____ debited in my A/c.
Other _____
7. SMS FACILITY: Please give SMS facility
Mobile No. _____ A/c. No. _____
8. PLEASE RESET SECURITY QUESTIONS OF MOBILE BANKING APPLICATION.
Mobile No. _____ A/c. No. _____
9. UPI Facility: 1. Only Credit 2. Credit & Debit both (per day limit Rs. 50,000/-)
Debit Card Detail : No (Only Option 1) Yes (Option 2) (Only Last Four Digit) _____
10. I / We required balance certificate for the date _____.

- 11. My passbook is lost / stale, please issue Duplicate Passbook.
- 12. My /our account is transferred to in-operative. I request you to make it operative. My / our fresh KYC documents are attached herewith.
- 13. I lost my cheque(s) / cheque book. Please mark stop payment from _____ to _____ cheque(s).
- 14. Please issue a new cheque book to me /us.
- 15. I / We don't require Saving Bank account held with you. Please close the same. I/ we have enclosed unuse Cheque(s) from _____ to _____.
- 16. Enable Monthly Statement on my email.
- 17. OTHER (Please mention here) _____

please debit the applicable charges to my Saving/Current A/c. _____

* Signature(s) of Customer

For Office use only:

Application received by: _____

Date: _____

Action Taken by: _____

Date: _____