

INDUSIND BANK DEBIT CARD APPLICATION FORM

Please fill in all the details

Name* _____

Address: _____

City: _____

State: _____

Pincode:

Tel No.: _____

Mobile No.: _____

Account No.:

If you would like to link an additional account to your IndusInd Bank Power Card, please mention the account number below.

1st Account Holder's Signature

2nd Account Holder's Signature

I/We authorise IndusInd Bank Ltd. to issue the IndusInd Bank Debit cum ATM card to me/us in lieu of an ATM card. I/We acknowledge that the issue and usage of the Card are governed by the terms and conditions as in force from time to time and agree to be bound by the same. I/We accept that the terms and conditions are liable to be amended by IndusInd Bank Ltd. from time to time. I/We understand that upon the issue of the IndusInd Bank Debit card to me/us, the existing ATM card linked to my/our account will be deactivated. I/We further, unconditionally and irrevocably, authorise IndusInd Bank Ltd. to debit my/our account with an amount equivalent to the fees and charges for use of the Debit Card.

Date _____

*Name as would appear on the card

FOR OFFICIAL USE ONLY

Branch: _____

Branch Official: _____

Date: _____

IndusInd Bank



Corporate Office: IndusInd House, 425 Dr. D. B. Marg, Mumbai - 400 004.

Tel: 022-2385 7474/9494. Fax: 022-2385 6037.

Visit us at www.indusind.com