



UCO BANK

UCO e-Banking Registration Form - Corporate

Department of Information Technology
Internet Banking Cell
7th Floor, Head Office - 2
3 & 4 DD Block, Sector - 1
Salt Lake,
Kolkata - 700 064
Tel: 1800 345 4567
Email :hoe_banking.calcutta@ucobank.co.in

Branch

Branch ID

I/We wish to register our Firm /Company /Corporation for availing of the UCO e- Banking Services

Name of the Account

Constitution Proprietorship Partnership Pvt.Ltd. Pub. Ltd. Other

Address for communication

City Pin

Phone-1

Phone-2

Fax (STD Code) (Phone#)

Mobile

Email

Choice of Corporate ID in the order of preference.(Bank has the right to allot any Corporate ID apart from the options given by the applicant in case of nonavailability of the same)

Choice # 1
Choice # 2
Choice # 3

The following Accounts in the name of our firm/company/corporation maintained by us at UCO Bank may be linked to the user ID assigned for the purpose of UCO e-Banking. We also agree that Bank may or may not link all the accounts, as the facilities are available only at selected branches.

Cust ID	Branch Name	Name of the Account	Acct Type	Account Number

The following Officials/Employees are authorised to operate the accounts . We request you to allot them User IDs to avail UCO e-Banking services.We understand and agree that all the transactions /actions done by such User(s) shall be binding on us.

Sl. No.	Name	Communication Address	Role	User ID	Cust ID to be linked *	Hierarchy
1						
2						
3						
4						

* For Branch use

Documents enclosed:

1	
2	
3	
4	

(Requisite documents like Board Resolution / Declaration etc. are required to be submitted giving mode of operation,and limits.)

Declaration:

We have read and agreed to be bound by the terms and conditions governing the Internet Banking (Corporate) facility displayed in the website www.ucobank.com .We accept that the Firm/ Company /Corporate would be deemed to be aware of the contents of the terms and conditions and that all the rights and liabilities would be governed by the said terms and conditions by the act of accessing on <http://www.ucobank.com>.We thereby agree to be subject to and comply with all the provisions of the Terms and Conditions which are incorporated by reference herein and deemed to be part of this Application Form to the same extent as if such provisions had been set forth in full herein.

Date

Place

**Signature of the Authorised Person
(With Company Stamp)**

For Office Use:

Application Sl. No. Date of Receipt:

We confirm having verified the signatures and mandates for accounts.We also confirm that KYC norms have been complied with by the applicant . Recommended for extending UCO e- Banking facility.

Date: Manager PFM No. Senior Manager PFM No.

For Head Office, Internet Banking Cell Use:

User created on:
User Enabled on:

Administrator

PIN Mailer
despatched on:

Authorized Signatory

N.B. Please submit the filled up application form at the branch where you are maintaining your account.