

# Vasai Vikas Sahakari Bank Ltd.

[Head Office]

Samaj Mandir, Opp. New English School, Vasai (W) Dist. Thane-401201 Tel 0250-232 6984/6998 Fax: 2310211

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## LETTER OF AUTHORISATION FOR RuPay DEBIT CARD

(Application for linking Joint Bank A/c. etc.)

Dear Sir,

I / We, (1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(All account holders other than first holder), the undersigned, are the joint account holder(s) of Bank A/c. No. \_\_\_\_\_ (*the "said account(s)"*) opened / operating with The Vasai Vikas Sahakari Bank Ltd. ("**VVS Bank**") along with Mr./Mrs. \_\_\_\_\_ (*name of the first holder*). I/We hereby authorize Mr./Ms. \_\_\_\_\_ (*name of the first holder*) to use the RuPay Debit Card on my/our behalf.

I/We hereby affirm, confirm and undertake that I/we have read the "**Terms and Conditions**" for *the usage of RuPay Debit Card Service* offered by Vasai Vikas Sahakari Bank Ltd. and I/we agree and abide by the same.

I/We hereby state that should I/We wish to revoke the above authorization, I/We shall duly issue a letter of revocation ("*the revocation letter*") to the Vasai Vikas Sahakari Bank Ltd. in this regard. The revocation letter will be valid after 8 days from the date of receipt.

Yours faithfully,

Name : \_\_\_\_\_

Name : \_\_\_\_\_

Signature: \_\_\_\_\_  
(*second holder*)

Signature: \_\_\_\_\_  
(*third holder*)

Name : \_\_\_\_\_

Name : \_\_\_\_\_

Signature: \_\_\_\_\_  
(*fourth holder*)

Signature: \_\_\_\_\_  
(*fifth holder*)