Application Form for Reissuance of Corporate IBS Password

FOR OFFICE USE

The Branch Manager Punjab National Bank BO	UID Number : Reference No : Date:	
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Reg: Request for duplicate password for Accounts Administrator

We are availing Corporate IBS facility, as per the following details:

Customer ID	
Corporate ID	
Admin User ID	
Name of Account	
Name of Administrator	
Mobile Number	
E-mail ID	

Please issue duplicate login password of Accounts Administrator.

I/we understand that my/our registration as Corporate Internet Banking Subscriber is subject to my/our acceptance and abiding by the terms and conditions as in force from time to time which are exhibited on the Internet Banking site of Punjab National Bank also mentioned in the brochure provided to me/us. I/we are maintaining following accounts with your Bank.

Signature of Account Administrator_____

Yours faithfully,

1	(Name:)	
2	(Name:)	
2	(Namo:	,	

(Signature of Account Holder(s)/Authorized person(s) along with seal/stamp)

FOR OFFICE USE

Application Form - for Duplicate password

PARTICULARS	SIGNATURE OF AUTHORISED OFFICIAL WITH GBPA	DATE
The account numbers and the account name quoted and the signature in the registration form tallied with branch records.		

Acknowledgement

I acknowledge the receipt of User ID/Password of Account Administrator. Kindly activate the same.

(Signature of Account Administrator)

PNB-1213