ICICI Bank HPCL Co-branded Debit Card Application Form

Applicant Name : _____ _____ _____

First Name Middle Name Last Name

☐ I am an existing savings/current accountholder and hold an ATM/ Debit Card Number _____linked to my account. I would like to link my account number _____ to my ICICI Bank HPCL Debit Card. I confirm that I am the sole account holder.

☐ I am a joint savings account holder of ICICI Bank and hold an ATM/ Debit Card Number _____linked to our account. We would like to link our savings account number _____to our ICICI Bank HPCL Debit Card. I confirm that I have the required mandate to singly operate the account.

(In case of multiple accounts, the Account number listed above will operate as the primary account linked to the Debit card.)

I / We authorize ICICI Bank to issue me/ us the ICICI Bank HPCL Debit cum ATM Card to me/us in lieu of a regular **ATM/Debit Card**. I/We acknowledge that the issue and usage of the Card is governed by the terms and conditions as contained in the brochure that will be given to me on request and as in force from time to time and agree to be bound by the same. I/We acknowledge that it is my/our responsibility to obtain a copy of and read the same. I/We accept that the terms and conditions are liable to be amended by ICICI Bank Ltd. from time to time.

I / We understand that upon issue of ICICI Bank **HPCL Debit card** to me/us, the existing ATM/Debit card linked to my / our ICICI Bank account will be deactivated. I/We further unconditionally and irrevocably authorize ICICI Bank Ltd. to debit my / our Account annually with an amount equivalent to the fees and charges for use of the ICICI Bank *HPCL Debit Card.*

I / We declare that all the particulars and information given in the Application form are true, correct, complete and up to date in all respects and I/We have not withheld any information. I/We confirm that I/We have had no insolvency initiated against me/us nor have I/we ever been adjudicated insolvent.

I / We authorize ICICI Bank Ltd./ its Group Companies or its agent to make references and enquiries relative to information in this application which ICICI Bank Ltd/ its Group Companies Agents consider necessary I/We undertake to inform ICICI Bank Ltd./ Group Companies/ Agents regarding change in my/our residence / employment and to provide any further information that ICICI Bank Ltd./Group Companies/ Agents may require.

I / We understand that certain particulars given by me/us are required by the operational guidelines governing banking companies.

I / We authorize ICICI Bank Ltd/ All other group companies of ICICI Group and their agents to exchange, share or part with all the information relating to my/our repayment history information to other ICICI Group Companies/ Banks/ Financial Institutions/ Credit Bureaus/ Agencies/ Statutory Bodies as may be required and shall not hold ICICI Bank Ltd / All other group companies of ICICI Group and their agents liable for use of this information.

I / We understand that ICICI Bank Ltd/ Group Companies/ Agents reserves the right to reject any application without providing any reason.

Date _____

_____ _____

1st Account holder's Signature 2nd Account holder's Signature

(In case of joint account holders, both account holders shall put their signatures authorizing the 1st applicant to operate their account through the ICICI Bank HPCL Debit card.)

Vehicle Ownership: ☐ Car ☐ Two wheeler ☐ None

Make of Vehicle: _____

Nature of ownership: ☐ Owned ☐ Company provided ☐ Financed

FOR BANK USE

Branch: _____ Date: _____

Signature/s Verified by Bank Officer: _____

Account Number Allotted _____

Cust-ID Allotted: _____