

Application form for Issuance / Re-issuance / Blocking of Debit Card

I wish to apply for Bank of Baroda Debit Ca	d Name of the Brai	nch
My/Our Account Type A	ccount Number	
Request for		
New Re-issuance Card I	Blocking Card Account Link / Delink	(
1. Name		
Date of Birth Date of Birth DD / MM / YYYY)	Gender Male	Female Others
Name as required on card		
	es) (Please leave one blank space in betwee	n each name)
2. Card Variants (Tick any one)		
VISA Classic VISA Pl	atinum Baroda BPCL NCM	MC VISA Vyapaar
RuPay Classic NCMC RuPay	Platinum NCMC RuPay Select NCN	VIC I
Mastercard Classic Masterd	card Platinum VISA Infinite (Opul	ence)
VISA Signature Male (Sapphire)	VISA Signature fer	nale (Sapphire)
	rld Agniveer NCMC bob World Dronacl	narya SCAN TO KNOW MORE
bob World Pudhumai Penn NCMC	Any other	
*The debit card variant shall be applicable for issuance a	s per account scheme eligibility	
3. Mobile No.	E-Mail	
4. Existing Debit Card No.		
	ILABLE COMMUNICATION ADDRESS IN NOTICE HALL BE DISPATCHED TO THE BASE BRA e to operate the account singly.	,
☐ I/We authorize Bank Of Baroda to issue a Debit cum ATM card to me/us☐ I/We further unconditionally and irrevocably authorize you to debit my/our account annually for Debit Card fees/charges.		
	oly authorize you to debit my/our account ann ECLARATION / DEBIT CARD UNDERTAKIN	-
I/We have received, read and understood the terr and conditions and to any changes made therein the sole account holder or have the required mar	ns and conditions governing the usage of the Debit from time to time by the Bank at its sole discretion Idate to operate the account linked to the Debit Ca Card to me/us, the existing ATM card of Bank of Ba	t Card. I/We accept to be bound by the said terms n without any notice to me/us. I confirm that i am ard singly and that I/We have completed 18 years
	the Debit Card shall be strictly in accordance with the number the Foreign Exchange Management Act,	
I/We accept full responsibility for my/our Debit Card and agree not to make any claims against Bank Of Baroda in respect thereto.		
The Bank reserves the right to disclose, in strict or as may be necessary or appropriate in connection	onfidence, to Bank's service providers, such inform to the issuance, transaction processing, etc.	ation concerning the Debit Card holder's account
	our base branch / login to bob World / bo/ Online/Offline promotional communicatio	_
(Applicant's Signature (In case of joint a	e) (Other Acco	ount Holder/s Signature) their signatures)
Date :	Bra	anch Code :
For use in Branch	Name of the Officer	Signature
Signature verified by		
Eligibility verified by		
Toll free No : 1800-5700	https://www.barkefbare	da in/personal-hanking/digital-products/cards