

# State Bank Group

## Application for International ATM - Debit Card

To  
The Branch Manager  
State Bank of

A. I hold the account no.

with you branch in my sole name/jointly with \_\_\_\_\_  
\_\_\_\_\_ to be

operated on Either or Survivor/Anyone or Survivor basis. I have  
been issued a domestic Debit Card bearing Number

/have not been issued any Debit Card (delete as applicable). I  
hereby apply for an International Debit Card for my use.  
I authorize you to block the Domestic Debit Card as long as I use  
the International Debit Card. I am aware that  
International Card can be used from India and abroad.

B. My name on the card should appear as under [This can be  
full name (not exceeding maximum 24 letters), or an  
abbreviated form of the name of the applicant for example, Bharat  
Kumar can appear as Bharat Kumar, B. Kumar or  
K. Bharat]

C. I furnish the following particulars to be used for identification  
when I contact the **"Help Line"** through telephone for  
reporting loss of International Debit Card

Fathers First Name

Mothers Maiden Name\*\*

Date of birth	Year of passing SSC	Year of Marriage***
DDMMYYYY	YYYY	YYYY
<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>

Do not furnish the surnames example; if the name is S R. Tendulkar, the name should be Sachin.

\*\* In respect of Mother's maiden name, you may furnish mother's name before marriage

\*\*\* If these dates are not relevant it may be filled as XXXX

I am aware that the International Card can be used for all domestic transactions and transactions involving foreign exchange permitted under the Foreign Exchange Management Act and the Rules framed there under by Reserve Bank of India from time to time. I undertake to use the card in strict compliance with the applicable Exchange Control/Management Regulations and any violation thereof will result in cancellation of the card and make me liable under relevant provision of the Act/Regulations. I also undertake to furnish all the details in respect of any transaction entered into by me to facilitate any investigation.

I hereby authorize you to recover from my account the cost of the card and all other fees which may be payable by SBI to MasterCard (other than transaction fee) for extra-ordinary services rendered by them (example lost/stolen card).

Place :

Date : (Signature of Applicant)

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

Address : \_\_\_\_\_

\_\_\_\_\_ Tel. No.: \_\_\_\_\_

Mobile : \_\_\_\_\_ e-mail : \_\_\_\_\_

### **OFFICE USE**

Account particulars & signature of Applicant & mode of operation verified. Request for issue of International Debit Card approved/declined for the reason

(delete as applicable)

Date Authorised official

Data for issue of international Debit Card forwarded for processing

Branch Name  
Code Number

Date Authorised official

### **Call Centre Details**

Call us Toll free\* : 1600 - 112211  
From other than MTNL / BSNL lines in India & abroad  
at 00-91-80-2560 8470, 2560 8980

Also please contact the nearest card issuing branch or email us at :  
sbicashplus@vsnl.net