

Name of the Concern	Customer ID	Current Account	OD (General)

User Information

Operator Information

1. Full User Name		Signature	
Date of Birth			
Mobile Number			
Email Address (Domain)			
2. Full User Name		Signature	
Date of Birth			
Mobile Number			
Email Address (Domain)			

Checker Information

1. Full User Name		Signature	
Date of Birth			
Mobile Number			
Email Address (Domain)			
2. Full User Name		Signature	
Date of Birth			
Mobile Number			
Email Address (Domain)			

Authorizer Information

signatures of the authorizers will be printed on the cheques in case of cheques printed through Prime Cheque Management Solution )

1. Full User Name		Signature	
Date of Birth			
Mobile Number			
Email Address (Domain)			
OTP	<input type="checkbox"/> Email <input type="checkbox"/> SMS		
2. Full User Name		Signature	
Date of Birth			
Mobile Number			
Email Address (Domain)			
OTP	<input type="checkbox"/> Email <input type="checkbox"/> SMS		

Please find the signature(s) of our Authorized Signatory (as per ‘Authorizer Information’ of this form and our board Resolution on Operational Mandate for banking accounts) & would request you to convert the said specimen signature into a Mechanical Signature or delete the said in PrimePay. Operational mandate of the authorized signatory shall be given separately. I/We hereby undertake that we shall intimate you through this form whenever any change of signatory (for any of the above role) is required into PrimePay. I/We further confirm that above users have the authority to perform roles and functions designated in the setup form.

Authorized Signatory of Client		Authorized Signatory of PBL	
<div><div></div><div>Authorized Signatory(s)</div></div> <div><div></div><div>Authorized Signatory(s)</div></div>		<div><div></div><div>Authorized Signatory(s)</div></div> <div><div></div><div>Authorized Signatory(s)</div></div>	