



ONLINE INTERNET BANKING
REGISTRATION FORM

To
The Branch Manager
Union Bank Ltd

.....

I wish to register as a user of UBL’s Internet Banking Service.

Name of Customer (25 Characters)

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Mobile Number: +88

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E-Mail:

Date of Birth: DD MM YY

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My Account Numbers	Single/ Joint* Accounts	(Branch Use) Transaction Rights (Y/N)	(Branch Use) ** Limited Transaction Rights (Y/N)

* Rights on the UBL i-Banking Service will be same as that in your account at the branch.

** Transaction rights to transfer funds within own A/C and new a/c opening request through branch intervention

I have read the provisions contained in the “Terms of Service (Terms & Conditions) document” of “UBL i-Banking” and accept them. I agree that the transactions executed over UBL i-Banking under my Username and Password will be binding on me.

Customer’s Signature

Date: