Bank of India Star Star <sup>Correct</sup> Requ	Transaction									
		Request		G						
The Manager,		Form No.	Branch Co	de	Serial Number					
Bank of India	Branch	(To be filled by the branch)								
Dear Sir/Madam, I, have availed the Bank of India Star	Connect (Core Banking) S	ervices.								
			7							
My User ID is										
Name of the Firm* (* Applicable in a	case of sole-proprietorshi	p/ Partners	hip/Body Co	rporate co	ncern)					
I request you to kindly extend me										
Services – Internet Banking.		, 3			· · · · · ·					

My new communication address is as under (Please mention, if there is change in address)

City						St	ate	2						Pi	n C	ode	è			

I understand that the Transaction Password, required for Fund Transfer facility shall be communicated through a PIN Mailer at my communication address and shall be enabled only after receipt of my acknowledge by the Bank.

## Declaration

I confirm that I have read and understood the "Terms and Conditions" annexed hereto / as given on the Bank's web site for the usage of **Bank of India** Star<sup>Connect</sup> (*Core Banking*) Services and unconditionally accept and agree to abide by the same and such other modifications made by Bank of India (BOI) from time to time. I am aware of the nature of services offered by Bank of India through Star<sup>Connect</sup> (*Core Banking*) Services and shall pay charges / taxes as applicable, from time to time, as set forth in Bank of India's web site or communicated / demanded by Bank of India from time to time. I also agree to all the terms / conditions of opening / applying / maintaining / operating as applicable / modified for usage of **Bank of India Star**<sup>Connect</sup> (*Core Banking*) Services - as may be in force from time to time. I further authorize Bank of India to debit my Account(s) towards charges for availing of services through Bank of India Star<sup>Connect</sup> (*Core Banking*) Services. I declare that all the particulars and information given in this form are true, correct, complete and up to-date in all respects and I, have not withheld any information. I agree and undertake to provide any further information that Bank of India reserves the right to reject any application or block or withdraw the Bank of India Star<sup>Connect</sup> (*Core Banking*) Services - to any or all account(s) without assigning any reason. I authorize Bank of India or their agents to make references and enquiries which BOI or its agents consider necessary in respect of or in relation to information in this application/further applications.

Date//	Signature
Place	Name ()

(Request to be supported with appropriate documents in case of Partnership/ Body Corporate concern) For Branch Use only (Strike out which ever is not applicable)

- 1. The above particulars, signatures and the details have been verified and the same are as per the Bank's records. The requisite document/s wherever, applicable is kept on branch records.
- 2. We RECOMMEND for extending Fund Transfer facility to the applicant/s.

Date://20 Place	Signature: Name:	Sign Code:	

## For Data Centre use only

DC Registration No.

1.Request Form received on \_\_\_\_

2.Profile

3. Transaciton Password set on \_\_\_\_\_