STATE BANK OF INDIA

(For individuals)

INTERNET BANKING" OnlineSBI "

Application Form for Reactivation of Username

(Please submit the form to the Branch where you are maintaining an account with Internet Banking facility)

FOR OFFICE USE Application Serial number:

Τо

The Branch Manager State Bank of India

Branch

I am a registered USER of your Internet Banking Service ~ "OnlineSBI"

for my / our following Account (s) at your branch.

My Username is

(Please note that username is case-sensitive)

Applicant's Name : (Max. 25 characters)

(Please mention 11 / 13 digit A/c No. as mentioned in your Pass Book / Statement of Account)

e-mail Address

Telephone No(s).

Address

Office: _____ Residence:

Pin

Please Reactivate my Internet Banking Username for the above-mentioned account. I confirm having read and understood the document containing the "Terms of Service" governing the SBI's Internet Banking and I accept the same. I further agree that the transactions executed over OnlineSBI in above-mentioned accounts under my Username and Password will be legally binding on me.

Date SIGNATURE VERIFIED

AUTHORISED OFFICIAL APPLICANT'S SIGNATURE

FOR OFFICE USE

Application Form - for Reactivation of Username

Application Serial Number:

PARTICULARS	DATE	SIGNATURE OF AUTHORISED OFFICIAL
The account numbers and the account name		
quoted and the signature in the registration form		
tallied with branch records.		
Authorisation for duplicate noted in user		
creation register.		

Notes:

Recommended for Banking Access	Reactivating	ernet mitted	Banking	Access	reactivation
DATE :	OFFICER		DATE	MANAGER	BRANCH MANAGER/ OF DIVISION

Reason(s) for rejecting the INB Service (if any)	-	
	DATE	SIGNATURE OF OFFICIAL
Reason(s) advised to the Applicant		