



Registration Form

Internet Banking - Interactive Information Exchange Service - Customer Information System (IIES-CIS) - Indian Bank, Singapore Branch

(Please fill up the particulars in bold letters without leaving any columns blank and submit to Indian Bank Internet Banking Cell, #03-02, No 3 Raffles Place, Bharat Building, Singapore 048617)

I/We wish to avail Internet Banking - Interactive Information Exchange Service - Customer Information System (IIES-CIS) facility from Indian Bank, Singapore. I/We submit herewith the required particulars.

Customer Account Number : (Enter first 6 digits only)

Customer Name :

NRIC/FIN/PP Number :

Mailing Address :

Email Address :

Tel Number :

H/P Number :

1. I/We have read, understood and agree to abide by the terms and conditions governing Internet Banking Services. Once my / our registration is accepted and User ID is activated by the bank, all my / our linked accounts (including any new accounts that may be opened with my / our Customer ID subsequent to issue of User ID / Password) will be covered under the rules governing the Bank's Internet Banking Services from time to time.
2. I/We request the Bank to allot the User_id / password for accessing the Internet Banking.

Authorized Signatory/Customer's Signature Company Stamp

Date : _____

.....
(Space for Bank's use)

(Signature/ Authority
Verified).
Forwarded to IT Dept to prepare PIN Mailer: Officer/Manager(Date)