

# **PoS Machine Installation**Merchant Relationship Form

### **Important Instructions**

Please fill all the information in block letters.

Please keep the following documents along with the application form

✓ Copy of Registration Certificate under Shops and establishments Act.

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- ✓ Copy of GST registration certificates.
- ✓ Copy of Partnership Deed, Memorandum of Association, Articles of Association, Power of Attorney (in case of partnership firms or companies).
- ✓ Copy of Rent receipt or telephone bill or electricity bill.
- ✓ Proof of signature of the authorised signatory.
- ✓ Passport / Voter ID Card/Driving License / PAN Card of the sole proprietor or anyone of the partners / directors.

## For filling in information regarding the nature of business please refer to the following list:

- Arts/Handicrafts/Sculptures
- Automobile Service Center/Garages
- Automobile Spares
- Automobiles
- Automotive Tyre Stores
- Bakeries
- Barber & Beauty Shop
- Book store
- Candy/Nut/Confectionary Stores/Dry Fruits
- College/University
- Computers/Computer Peripherals
- Cosmetics/Beauty/Health Clubs,
- Crystal/Glassware /Kitchenware
- Dental/Medical Lab
- Departmental Stores
- Drug Stores/Pharmacy
- Electric Utilities
- Electronics
- Fuel Dealers/Coal/Petrol
- Furniture stores

- Furriers & Fur Shops
- Handicrafts
- Hardware Store
- Home Appliances/Consumer Durables
- Hotels
- Jeweler/Marbles/Watches
- Leather Goods
- Novelty/Gift Shop
- Opticians
- Photo Developing/Labs
- Readymade Garments
- Restaurant
- Sanitary Utilities
- Shoe Stores
- Stationery
- Tailors
- Telecommunication Equipments
- Textile
- Tours & Travel Operators
- Others (Specify)

Branch \_\_\_\_\_



# **PoS Machine Installation**

# Merchant Relationship Form

Marketing Nan	ne (as used in the name of the shop etc.)		
Type of Busine	ess (Please refer list)		
Nature of Ownership (Tick as applicable)			
( ) Sole Propri	etorship ( ) Partnership Firm ( ) Limited Company ( ) HUF		
( ) Govt. Own	ed ( ) Trust ( ) Franchisee ( ) Other (specify)		
Address of Business Establishment			
Building Name			
Road Name/No.			
City	Pin Code		
State	Phone (with STD code)		
Mobile	e-Mail		
DAN Number	GSTN		
1 AIN INUILIDEI			
	ip Details (Tick as applicable) ( ) Owned ( ) Leased		
Shop Ownersh	ip Details (Tick as applicable) ( ) Owned ( ) Leased ietor/Partners/Managing Director/Directors/Karta (IN BLOCK LETTERS		
Shop Ownersh Name of Propr			
Shop Ownersh  Name of Propr  a)			
Shop Ownersh Name of Propr  a)  b)			
Shop Ownersh  Name of Propr  a)			



9.	Address of Proprietor/Managing Director/Karta/Any one of the Partners (IN BLOCK LETTERS)				
	Residential Address				
	Building Name				
	Road Name				
	Land Mark				
	City	Pin Code			
	State	Phone (with STD Code)			
	Mobile	e-Mail			
10.	Name of Principal Contact				
	First Mid	dle Last			
11.	Existing J&K Grameen Bank Relationship				
	Existing Account Number				
	Type of Account	Relationship Since years months			
12.	Relationship with other banks (if any)				
	Name of the Bank				
	Address of the Bank				
	Type of Account	Relationship Since years months			
	Account No				
13.	Existing POS Machine Details (if applicable)				
	Date of Commencement of Business	Operation in the same premises since			
	Credit Cards already accepted (Tick as applicable)	( ) Visa ( ) MasterCard ( ) RupayCard			
		( ) If others please specify			
	Annual Business Turnover (in figures)	(in words)			



### Merchant Application, Debit Authorization and Declaration

#### **Merchant Application**

I/We wish to enroll under J&K Grameen Bank Merchant program and hereby agree to be bound by the terms and conditions of the Merchant Establishment Agreement appended to this Merchant Relationship Application Form. I/We confirm that all information provided to J&K Grameen Bank in this form is correct and accurate. I/We certify that the person signing this application and ME agreement has full authority to do so and thereby binds us to the Merchant Establishment Agreement. J&K Grameen Bank and/or their representatives may contact our bankers or any other source to obtain information with regard to the information provided in this form.

#### **Debit Authorization**

I/We authorise you to credit/debit our Current/Cash Credit/Merchant Account with J&K Grameen Bank for all transaction, fees and charges as per the Merchant Agreement with J&K Grameen Bank.

Our existing Account Number is	

I/we do hereby authorise the bank to debit without any prior notice our current/cash credit account and raise overdraft thereto for settlement of POS (Point of Sale) installation charges / charge back accounts / excess payments made, if any, at any time, by the bank and / or any other amount(s) becoming incidental thereto during the course of card acquiring business through the POS terminal (s) of J&K Grameen Bank. By virtue of this authority I/We on behalf of said establishment owe no authority to challenge the bank's absolute discretion to this regard in any court/forum etc.

#### **Declaration**

I/We agree to abide by the below mentioned terms and conditions in addition to already signed agreement for installation of PoS Machine. For all transactions above `7500 I/We will follow the following additional validation. The cashier would request the customer to produce a photo identification document.

- The cashier would tally the Name on the Photo ID document with that on the card and verify resemblance with the photo ID document.
- The cashier would note down the ID details in the reverse of the Merchant copy of the charge slip or on the invoice or in our internal systems.
- These details will be stored, for the period charge-slips are required to be stored.
- This procedure would be followed for all VISA, MasterCard and American Express cards, irrespective of Credit, Debit or Prepaid and for both domestic and international cards.

Signature & Name	Designation
Signature of Authorised Signatory as appe	earing herein above is hereby attested
Signature of Branch Head	Name & Code



## For Office use only

(To be filled in by Branch)

Marketing Name (as used in the name of the shop etc.)						
	Type of Business (Please refer list)					
Name of Principal Contact	act					
First	Middle	Last				
Name of Proprietor/Managing Director/Karta/Anyone of the Partners (IN BLOCK LETTERS)						
Residential Address						
Building Name						
Road Name						
Land Mark						
City	Pin Code _	Pin Code				
State	Phone (with STD Cod	e)				
Mobile	e-Mail					
	Existi	ng J&K Grameen Bank Relationship				
Nature of Account	Existing Account Nur	nber				
Recommendation						
	ocuments obtained (Tick as Applicable)  Convert Provision Contributes under Shops and establishments Act. OR					
	Copy of Registration Certificate under Shops and establishments Act. OR Copy of GST registration certificates.					
	Copy of Partnership Deed, Memorandum of Association, Articles of Association, Power of Attorney					
Copy of Rent receipt/telephone bill/electricity bill.						
t is hereby certified that  The agreement has been executed with notary attestation on Non-judicial stamp paper of Rs.100 or as applicable as polynomials.						
local law.  Authorised signatory proof is enclosed.						
The Merchant is maintaining account with us for more than last six months and account is running satisfactory or the						
merchant is/was maintaining account with other bank for more than last six months and account is running satisfactor						
statement for more than	record along with account opening form.					
	The application has been duly filled in.					
I undertake to raise overdraft	er KYC Norms have been obtained and kept on it in the account of M/E upon the instructions of the charge back/s or any other charges etc.					
Account of ME for fulfilling						