



बैंक ऑफ़ बड़ौदा
Bank of Baroda

The Senior Manager (Operations),

Dubai Main Branch
Deira Dubai Branch
Abudhabu Branch
Sharjah Branch
Al Ain Branch
Ras Al Khaimah Branch
(Please tick-mark the applicable branch)

Dear Sir,

RE: Application for Tele-banking (IVRS) Service Registration

I/We request you to register my/our account(s) for Tele-Banking (IVRS) Service. I/We request you to register and activate Tele-Banking Service in following of my account(s):

1. Account No. (14 Digit):
Date of Birth* / Date of Trade License* : _____
Mobile No: _____ Tel No.: _____
2. Account No. (14 Digit):
Date of Birth* / Date of Trade License* : _____
Mobile No: _____ Tel No.: _____

** Required for validation while informing the IVRS access PIN to authorized person.*

Since this is an additional service being granted by the Bank, I/We will not claim it as a matter of right. I/We also undertake that I will immediately bring to the notice of your branch any anomaly / mistake noticed in my/our above mentioned account(s) for rectification. I/We understand that the balance given to me by the IVRS will be latest of previous / last working day.

Yours faithfully

(Authorized Person's Signature)

Date: _____

Place: _____