

## **Enrolment Form for E-Statement of Account** (For Individual Accounts - Single / Joint )

Opting for Electronic Statement of Account can benefit you in the following manners:				
		24/7 Availability		
Free of Cost More Secure Fast & accurate 24/7 access Save nature & our planet				
Individuals & Sole Proprietors can enrol for free of cost e-Statement of Account through any of the following means:				
Deliver this enrolment form duly signed to your branch.				
Sign, Scan & E-mail this enrolment form at: esoa@abl.com				
Request our <b>24/7 Call Centre</b> at 0800-22522.				
TITLE OF ACCOUNT POSTAL ADDRESS			BRANCH NAME BRANCH CODE ACCOUNT NO. IBAN	
I/ We request you to replace my/ our physical statement of account to electronic form for the account detailed above. For this purpose, the e-mail address given below shall be used instead of the above address for delivery.				
E-MAIL ADDRESS				
TERMS & CONDITIONS				
<ul> <li>1 These Terms &amp; Conditions are in addition to and form integral part of the regular Terms &amp; Conditions of account opening and its operation. The bank may alter or amend these Terms &amp; Conditions at its sole discretion.</li> <li>2 It is sole responsibility of Account Holders to ensure that the provided e-mail address is correct and keep the above mentioned e-mail address active, functioning, valid; and secret in all respects.</li> <li>3 Any change in e-mail address or any request for discontinuation of this facility will be immediately informed by Account Holder to the Bank. Failure to receive any e-statement/ confirmations due to change of e-mail address(es) not communicated to the Bank will not be considered as reason for claiming non-receipt of the e-statement/ confirmations.</li> <li>4 Account Holder agrees to keep the Bank indemnified against all actions, proceedings, liabilities and claims, cases, damages, costs and expenses in relation to or arising out of the Bank accepting this request and transmitting e-statements and information through electronic means.</li> <li>5 This request will not override the e-mail address already registered for ABL Allied Direct facility.</li> <li>I/ We confirm having read and understood the above Terms &amp; Conditions.</li> <li>1. NAME</li> <li>2. NAME</li> <li>3. NAME</li> <li>4. NAME</li> </ul>				
		3. NAME		
SIGNATURE  Note: This facility is not available	SIGNATURE for Business Accounts, exce	SIGNATURE  ot Sole Proprietorship accounts	SIGNAT	
FOR BANK USE ONLY  DATE  D D M M Y Y Y Y				
1 AUTHORIZED SIGNAT NAME: IBS #	 URE 	AUTHORIZ NAME:	ZED SIGNATURE	