

REQUEST FOR ISSUE OF DUPLICATE PASSWORD / DELETION OF USER ID
(To be submitted in corporate letter head)

To
The Branch Manager, City Union Bank Ltd.,
..... Branch

Date

Dear Sir,

Sub: Request for issue of Duplicate Password / Deletion of Password

Ref: Corporate ID

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I/We, the authorized person/s of M/s.
(Name of the Corporate) for the CNB facility provided by City Union Bank, request the following:

1. Issue of Duplicate Password for the following User IDs :

No.	NAME OF THE USER	USER ID	SIGNATURE
1			
2			

2. Deletion of User IDs for the following Users:

No.	NAME OF THE USER	USER ID	REASON FOR DELETION

Please issue duplicate passwords / delete user IDs as per the above request and inform us.

Thanking you,
Yours faithfully,

.....
(Authorized Person/s as mentioned in latest Board Resolution/Mandate, dt.....)

For Branch Use Only:

Verified the signature/s of Authorized persons available with the Bank's records and request to do necessary changes.

Forwarded to Computer Systems Department.

ABM / Branch Manager