



MERCHANT APPLICATION FORM

I would like to request Druk PNB Ltd (DPNBL) to issue a PoS (Point of Sale) terminal for my business. The details of my establishment are furnished below:

1. MERCHANT ESTABLISHMENT DETAILS*

Legal Name/Name of the establishment:

Registered Address:

TPN No.

Installation Address same as registered address (Please select [✓]) Yes No
(If no, Please provide the details) Location: City:

Contact Details:

Name of the Contact Person:

Official Email ID:

Primary Mobile No. Secondary Mobile No.

Landline No.

2. MERCHANT PROFILE *

Business Entity (Please select [✓])

Government Society Individual Private Company Sole Proprietor Public Company
 Partnership Trust HUF Others(Please specify)

Nature of Business (Please select [✓])

Airlines Clothing Stores Clock/Watch Store/ Jewelry Telecommunication Hardware
 Hotels Grocery/ Supermarket Health and Beauty Spas Limousine /Taxicab
 Hospitals Departments Stores Petrol Pumps Electronics
 Restaurant Travel Agent Others(please specify)

3. MERCHANT BANK DETAILS *

Bank Account Type:

(Please select [✓]) Current Over Draft

Account No.



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4. MERCAHNT PROPRIETOR 1 DETAILS*

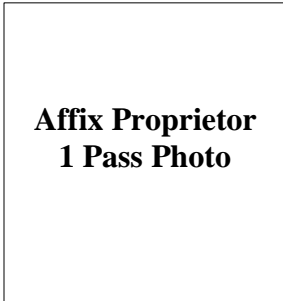
Name of the Proprietor /Partner/ Director: -----

Gender: (Please select [✓]) Male Female

Residential Address: -----

Mobile No:

CID No:



**Affix Proprietor
1 Pass Photo**

4. MERCAHNT PROPRIETOR 2 DETAILS *

Name of the Proprietor /Partner/ Director: -----

Gender: (Please select [✓]) Male Female

Residential Address: -----

Mobile No:

CID No:



**Affix Proprietor
2 Pass Photo**

5. MERCAHNT FEES (In Nu.)

Merchant Fees (Per terminal)	Wireless PoS (GPRS)
No. of products	
Setup / Integration Fee	
Joining Fee	
Monthly Service Fee	Year 1
	Year 2 Onward
Per Transaction Fee	

6. MERCHANT TURNOVER*

Percentage (%) of business on Cards	
Expected annual business of Cards	
Existing Acquirer relationship	<input type="checkbox"/> Immediate Delivery <input type="checkbox"/> Lead time (_ _ _ _ _) days
Expected client mix:	<input type="checkbox"/> Local _ _ _ _ _ % <input type="checkbox"/> International _ _ _ _ _ %

7. MERCHANT DECLARATION*

I/We request to accept MSF /Commission as levied under Merchant Application Form. I/We agree to pay any charges/fees stipulated by the Bank from time to time.

I/We hereby confirm that all information given to Druk Punjab National Bank Limited (DPNBL), in this form is correct and want to have an exclusive acquiring relationship with DPNBL. If at any stage it is brought to the notice of the Bank that any information submitted herein is suppressed/incorrect/false, or that it has been given



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with a view to willfully mislead the Bank, the Application is liable to be rejected and the Terms and Conditions shall also be terminated forthwith, without revoking the Bank's rights to proceed legally against the Merchant Establishment and or the business owners. I/We agree and accept that DPNBL shall at its sole discretion, may reject/accept the merchant application form at any processing stage. I/We understand that DPNBL reserves the right to provide me with the PoS type /variant based on certain parameters and eligibility criteria as per their internal policies.

I/We hereby understand and agree that it is my/our responsibility to obtain, read and understand the Terms and Conditions related to DPNBL PoS and hereby undertake to abide by the Terms and Conditions as may be in force from time to time. Further I/We understand and agree that use of DPNBL PoS shall be deemed to be an unconditional and irrevocable acceptance of the said Terms and Conditions. DPNBL reserves the rights to directly/indirectly verify all the information stated in this Application and to seek credit references.

I/We further agree to accept information about new products, services and features introduced or offered by the bank from time to time via phone/email/SMS/direct communication from a bank official.

Individual Merchant

I hereby represent that I do not possess any Registration Document for business activity which is carried in name of _____ over and above the KYC documentation submitted by me to DPNBL for opening a Bank Account. Notwithstanding any change in the constitution of my Firm or disposal of my interest in the said business or change in the name and nature of my firm, I undertake to intimate to DPNBL about such change and agree to submit the relevant documents to DPNBL in terms of applicable RBI guidelines/circular (as amended from time to time) and shall continue to be liable to discharge all my obligations to you at all times and also reconstitute and close accounts as may be required.

Signature of
Proprietor/Partner
s/Director/Authoriz
ed Signatory *

(Affix Legal
Stamp)

Name: _____

Place: _____

Signed on: __/__/____

***** For official use only *****

TID: _____

POS S/N: _____

Issue Date: __/__/____

Received by (Name and Sign of the recipient): _____