

**BCC Bank****BHOPAL CO-OPERATIVE CENTRAL BANK LTD.**

Merchant Enrollment Form

Programme Type	<input type="checkbox"/> Mosambee ME	Agreement / Enrollment Date	DD / MM / YYYY	Device Name	CAPITAL LETTER	No. of Device
	<input type="checkbox"/> CSS Name -					

Fields marked* are compulsory.

**Applicable for Partnership/Pvt. Ltd.

New Merchant : <input type="checkbox"/> Merchant Details - Demographic Information		<input type="checkbox"/> Existing Merchant - Mobile No. _____											
Doing Business As* (Name on Shop Board)													
Registered Business Name* (Legal Name on Govt. Document)													
Organization Type*	<input type="checkbox"/> PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PVT. LTD. <input type="checkbox"/> LLP <input type="checkbox"/> PUBLIC LTD. <input type="checkbox"/> TRUST <input type="checkbox"/> SOCIETY <input type="checkbox"/> HUF <input type="checkbox"/> GOVT.												
Business Address*													
City*											PIN*		
State*											Rented*	Y <input type="checkbox"/>	N <input type="checkbox"/>
Landmark*											Turnover	20L + <input type="checkbox"/>	<input type="checkbox"/>
E-mail**													
Company PAN / CIN No. **													
Merchant Category* (Kind of Business Into)													
Residential Address*													
City*											PIN*		
State*											Rented*	Y <input type="checkbox"/>	N <input type="checkbox"/>
Landmark*													
Main Person - 1*													
PAN No*													
POA No*													
Mobile*											Land line No.		
Main Person - 2*													
PAN No*													
POA No*													
Mobile*											Land line No.		

Commercials

Cards	Debit (Up to Rs. 2000/-)	Debit (Above Rs. 2000/-)	Credit Card (Visa/Master/Rupay/Diners)	Amex	Premium	International	Commercial
MSF (%)					As per Bank Charges		
						Micro ATM	
Services	UPI	Bharat QR (charges as per UPI or Cards)	SMS Pay (As per Payment Instrument)	EMI	Wallet	Amount Slab (Rs.)	Commission Pay-out
MSF (%)						100-299	Rs.
						300-999	Rs.
						1000-1499	Rs.
						1500-1999	Rs.
Charges	Setup Fee / Monthly Rental	Settlement Fee per Batch	Annual Maintenance Cost	Low Usage Charges	Lost/Damage Device	2000-2999	Rs.
Rs.						3000-3499	Rs.
						3500-10000	Rs.

(P.T.O for T&C)

Undertaking for using Mobile Number as Merchant Identification									
I/We, hereby state and undertake that the following Mobile Phone Number rightfully belongs to me / us.									
I/We, hereby authorize SYNERGISTIC FINANCIAL NETWORKS PVT. LTD. to use the above Mobile Phone Number as my unique identification in the various payment systems / platforms operated by them.									

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Rs.						3000-3499	Rs.
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Payment Mode	<input type="checkbox"/> Sms Pay <input type="checkbox"/> QR <input type="checkbox"/> Wallet <input type="checkbox"/> Cheque <input type="checkbox"/> NEFT <input type="checkbox"/> Payment Ref. No. _____
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Settlement Bank Account																								
A/c. Holder Name																								
Bank Name*		BHOPAL CO-OPERATIVE CENTRAL BANK LTD.															A/C Type*		<input type="checkbox"/> Current <input type="checkbox"/> Savings (For Sole Proprietor only)					
A/C No.*																	IFSC Code*		C B I N 0 M P D C A E					
I hereby authorize Synergistic Financial Networks Pvt. Ltd. to make all credits to the above mentioned bank account.															Name of Main Person :									
															Stamp					Sign (as per PAN card)				

Declaration	
I/We further declare that I/We have read and agreed to be bound by the current terms and conditions on the website : https://www.mosambee.cash/tnc.html or any subsequent changes to the terms & conditions published at the website : https://www.mosambee.cash/tnc.html I/We accept mentioned commercials / charges. I/We agree that commercials / charges are non-refundable and subject to change in future. I/We confirm that the information given by me / us is true and complete and forms the basis for enrollment as member of SYNERGISTIC FINANCIAL NETWORKS PVT. LTD. I/We agree that submission of KYC documents and this form shall both be treated as approval. I understand that on KYC documents will be returned to me in case of rejection by authority.	
Authorised Signatory	
Name :	
Stamp	Sign (as per PAN card)

Merchant Copy

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Authorised Signatory	
Name :	
Stamp	Sign (as per PAN card)