



THE PAYYANUR CO-OP. TOWN BANK

LTD. No. C. 827

P.B. No. 13, PAYYANUR, Phone : 202930, 202950

Branch :

(For Branch Use)

Account No.

ACCOUNT OPENING FORM-FIXED DEPOSIT / RECURRING DEPOSIT

1. Cus ID
2. Name in full of the applicant
3. Address
Mob. No:
4. PAN Age DOB : Sr. Cityzen Yes/No
5. Amount deposit In Words.....
6. Term Month Days
7. Mode of Operation : Single Jointly Either or Survivor
8. Nomination : Required Not Required
9. Interest to transfer required Yes No Period M SB A/C No.
10. Renew after due Yes (With Interest/Without Interest) No Due SMS alert Yes No
11. Deduct TDS Form 15G/15 H

DECLARATION : I agree to abide by all the rules of the Bank now in force or to be brought ino force from time to time

Station :

Date :

Signature

* Here enter the person or persons to whom you wish your interest in the Bank to be transferred in case of death unless the deposit is made under Either or Survivor System.

SPECIMEN SIGNATURE

1.
2.
3.

Signature Admitted

Manager

FORM (DA 1-NOMINATION)

Nomination under Section 45 ZA read with Section 56 of the Banking Regulation Act. 1949 and Rule 2 (1) of the Co-operative Banks (Nomination) Rules, 1985 in respect of the Bank Deposits

(I/We.....

[Name(s) and address)]

nominate the following person to whom in the event of my/our/minors, death, the amount of the deposits, particulars whereof are given below, may be returned by THE PAYYANUR CO-OPERATIVE TOWN BANK LTD NO.C 827.....

Nomination Number	Name	Address	Relationship with Depositor if any	Age	If nominee is a minor his date of birth

*2 As the nominee is a minor on this date. I/We appoint Shri./Smt./Kum.....to receive the amount of the deposit on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Place:

Date:

Name(s) Signature (s) and address (es) of witness (es) ***

***Signature (s) / Thumb impression (s) of Depositor (s)

"Where deposit is made in the name of minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor. ** srrike out if nominee is not a minor. ***Thumb impression (s) shall be attested by two witnesses.