



**THE SAMASTIPUR
DISTRICT CENTRAL CO-OPERATIVE
BANK LTD.**

Branch

APPLICATION FOR RECURRING DEPOSIT

Dear Sir,

I/We request you to admit me/us to subscribe to the Recurring Deposit Scheme.

I/We hereby undertake to deposit a sum of Rupees..... every month on or before the last working day of that month and agree to receive Rupees 5/3.4 month after the last installment of the installment which I/We have undertaken to pay.

I/We hereby undertake to abide by the Rules of the Recurring Deposit Scheme which are now in existence and which hereafter be made.

I/We declare that the following information is correct.

Name

Father's Name

Occupation

Permanent Address

Postal Address

Birth date in case of minor

Special instructions

Nominee Relationship

Signature of nominee Signature of Applicant

Introduced by Acc No.

A/c No.

L.F

Branch Manager

Br.