

Account No.	
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APPLICATION FOR RECURRING DEPOSIT ACCOUNT

Date :

To,
The Chairman,
Jyothi Co-operative Credit Society Ltd.,
Malhotra Chambers, 31-33, Police Court Lane,
Near Handloom House, Fort,
Mumbai - 400 001.

M.No./N.M.F.No.:

Sir,

I/We wish to open a Recurring Deposit Account in your society's book of Account and mention below the particulars for the same.

1. Name, Address & Telephone No. _____
of the depositor/s

2. Minor's Date of Birth, (if any) _____
3. Monthly Deposit _____ No. of Months _____
4. Specimen Signature _____
5. Name of Nominee (compulsory) _____
6. Introduced by _____

I/We agree to abide by your society's bye-laws/rules in force in this respect.

Please note that if a minor is one of the depositors, please mention minor's name first and guardian's name next. Mention minor's date of birth wherever minor's name is given in the application.

Yours faithfully,

Applicant's Signature

OFFICE REMARK

1. Rate of Interest _____
2. Due Date _____
3. Total Amount Due Rs. _____
4. Particulars are checked _____

For Jyothi Co-op. Credit Society Ltd.

Manager