

To,
The Secretary

Place
Date

TELLICHERRY TOWN SERVICE CO-OP: BANK LTD;
No. C. 929

Application For Fixed Deposit

Dear Sir,

Please accept Rs.....(Rupees.....

.....) as a Fixed Deposit, Subject to your Rules, in the name of Depositor/s in full with complete address in BLOCK LETTERS.....

for a period ofmonth/days of.....percent interest per annum as repayable with interest to*

*Fill up here as the depositor, either survivor of the Depositor any of the Depositors all the Depositor jointly or any other condition for repayment as may be required.

Note :- If the depositor/sis/are making the application, the specimen Signature may be given below.

SPECIMEN SIGNATURE

- 1. Name.....
- 1.
- 2.
- 3.

- 1. Name.....
- 1.
- 2.
- 3.

Nominee.....

.....Signature

In other cases specimen signature of the Depositor / Depositors should be filled with the Bank Soon.

Bond Ref. No.

Date

Introduced by.

Secretary