



DURGAPUR MAHILA CO-OPERATIVE BANK LTD.

TIME DEPOSIT ACCOUNT OPENING CARD

Date :

Please open a Time Deposit Account in my/our name(s) $\frac{I}{We}$ hereby declare that Time deposit Rules of the Bank have been read $\frac{by\ me / us}{to\ me / us}$ and that $\frac{I}{We}$ accept them as binding upon $\frac{me}{us}$

Full Name _____
(in block letter)

Father's / Husband's Name _____

Specimen Signature(s) _____

Address _____

Mode of operation (See overleaf for details)

OFFICE USE

Signature(s) Verified
Branch Manager / Accountant

Account No.

Authorised officer

Maturity Date

Folio A/c No

Occupation Tel. No.

SPECIAL INSTRUCTION (For Joint Accounts only)

The account to be operated upon by :

1. Either or Survivor 2. Jointly or Survivor 3. Former or Survivor
4. Later or Survivor 5.

I/We tender herewith by Cash / Cheque / Draft (as per enclosed pay-in slip) a sum of Rs.
(Rupees

Which may please be placed in Months / Time Deposit as per your existing
rate of interest of % p.a. and I / We further agree to abide by RBI directives
on Interest Rates on Deposit and allied matters

Specimen Signature (s)

PLEASE OPEN

Introduced by

SB / Current A/c No. etc.

Tel. No.

Zonal Manager / Branch Manager
Officer-in-Charge