



DURGAPUR MAHILA CO-OPERATIVE BANK LTD.

ENDOWMENT DEPOSIT ACCOUNT OPENING CARD Date :

Please open an Endowment Deposit Account in my/our name(s) $\frac{I}{We}$ hereby declare that Endowment 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)

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 undertake to deposit a sum Rs..... every month for a period of months on or before the last working day of each month and agree to receive Rs.@% 30 days after the date of payment of the last instalment. I/We further agree to abide by RBI Directives on Deposit Accounts 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