ने किया है किय

नीलकंठ जनिहत को-ऑपरेटिव (अर्बन) श्रिफ्ट एण्ड क्रेडिट सोसाइटी लि० (पंजीकरण संख्या १०७८९ (ई) दिल्ली प्रशासन, दिल्ली, दिनांक ०७-०३-२०२२) पंजीकृत कार्यालय : **B-35,** राम गली मण्डावली, दिल्ली—110092 फोन : 9599936434, 9810976481, 9350309685

ACCOUNT OPENING FORM FOR RECURRING DEPOSIT (R.D.) / FIXED DEPOSIT (F.D.) O.D. (OPTIONAL DEPOSIT) / SAVING ACCOUNT

		cross sign on	
То	Dated	photo is must	
The Secretary / President,			
Dear Sir,		*	
I am a member of your Society and wish to depos	It in your Recurring Deposit/Fixed Deposit / M	IS Scheme, as under :-	
1. In Recurring Deposit (R.D.):	Rs per month for Mo		
2. In Fixed Deposit (F.D.):	Rs for Mo		
3. In Monthly Interest Scheme (MIS):	Rs for M		
I understand the Rules & Bye-laws of the Society modifications thereto.			
I hereby nominate the following person(s) to whom	all manay due to me by the Seciety in the	wont of my doub	
may be paid :-	rail money due to me by the Society, in the e	vent of my death,	
Name of the Nominee	Polationship	11 (5° 0)	
	eiationsnip	Age	
Note:-		Yours faithfully.	
 (1) No interest will be paid in case of break of RD within (2) In case of prematurity payment of RD/FD interest wi @ 6% p.a. for total deposit period. 	6 months. Signature		
3) PAN No. 4) Aadhar No. Recommendation of the managing committee : The above Deposit may be accepted.	Name		
	A/C No		
	Mobile No		
	E-mail		
	Address		
President / Secretary			
AFFIDA\	/IT DECLARATION		
Wedo hereby declare the above is correct, complete and is truly stated. Includible in the total income of any other person declare that the tax on my/our estimated total income. Tax Act, 1961, for the previous year ending	I/We declare that the incomes referred to under section 60 to 64 of the Income Tax is omes computed in accordance with the produce of the previous year ending on	o in this form are not Act, 1961. I/We further ovision of the Income- ar will relevant to the	
Place			
Date	9	Signature of Declarant	