

RAJARSHI SHAHU SAHAKARI BANK,LTD.,PUNE

i/we agree to comply with and be bound by the Bank's Rules for the time being in force for the conduct of such account i/we authorise the bank to collect bills,cheques,etc. for and on behalf of me/us and undertake to abide by and be bound by the Terms and Conditions in this behalf.

Spl.Instructions for Term Deposits : "in the event of death of any of the joint depositors prior to maturity of the deposit.the bank will be at the request of the surviving depositor or all surviving depositors at liberty though not bound and at its absolute discretion to add delete any name or to repay the deposit before maturity or grant an advance against the sercuity thereof on such terms and conditions as the Bank may decide and such payment before maturity shall constitute a vaild discharge to the Bank"

2)I/We understand that the Term Deposit will be automatically renewed for the same period along with,accoured interest at prevailing rate in absence of specific instructions before due date.

Photo	Photo	Photo	Signature of Account Holder

NOMINATION FORM DA 1

Nomination under Sec. 45ZA read with section 56 of the Regulation Act 1949 and Rule 2(1) of the Co-operative Banks(Nomination)Rule 1985,in respect of Bank deposits.

I/We _____

(Name (s) & Address (es))

Nomination the following person to whom in the event of my/ our mionr's death the amount of deposit in the account, particulars whereof are given below, may be returned by **RAJARSHI SHAHU SAHAKARI BANK LTD.PUNE**

_____ Branch

Nature of Deposit & number	Nature of Address & Nominee	Relationship with Depositor if any	Age	if nominee is a minor his date of birth

* As the nominee is a minor on this date, I/We appoint _____

_____ (Name,Address & Age) to receive the amount of the deposit in the Account on behalf of the nominee in the event of my / our / minor's death during the minority of the nominee.

Place _____

Date

D	D	M	M	Y	Y	Y	Y
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** Signature (s) # Thumb impression(s) of Depositors

Signature of withness No.1 _____	Signature of witness no 2 _____
Name(s) _____	Name (S) _____
Address (es) _____	Address (es) _____

****Where deposit is made in the name of a minor , the nomination should be signed by a person lawfully entitled to act on behalf of the minor.# Thumb impressions shall be attested by two witnesses.**

Nomination Registraion No. _____

Date

D	D	M	M	Y	Y	Y	Y
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Singnture of Account holder _____

Signature & code no.of Branch Officeal _____ Acknowledgment of nomination received on _____

Terms and conditions regarding collection of Cheques/Bills & Otheer instruments

The Bank at its option but at the rick & responsibility of the account holder may

- 1.Collect proceeds of the instruments logged by the Account holder form time to time
- 2.Appoint an agents to collect the proceeds of the instruments lodged by the Account holder and as such agent's appointed shall be the agents of the Account holder to collect such instruments.
- 3.Recover proceeds of instruments lodged by the Account holder by wey of Bank Drafts/Cheques or any other mandate in lieu of cash
- 4.Take action /steps as deemed neccessary to have proceeds of the in instruments loged.
- 5.The Bank is hereby empowered to recover the various charges .if any by debiting the same to the accouting holder.

RAJARSHI SHAHU SAHAKARI BANK,LTD.,PUNE

Residential Address :

Consumer Durables Ownership : Computer Microwave LCD Television
 Digital Camera DVD Player Home Theatre System
 Projection Television Airconditioner

Vehicle Ownership : Car Two Wheeler None Both

Car Model & Make: _____

The House you Currently Live in Rented Ownership
 Company Provided Purchased against a loan

Types of Loan	Loan Facilities Whether availed	Number of years since You last availed the laon	In the next 6 months do you intend availing any of these loans?
1. Car	: <input type="checkbox"/> Yes : <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	: <input type="checkbox"/> Yes : <input type="checkbox"/> No
2. Housing	: <input type="checkbox"/> Yes : <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	: <input type="checkbox"/> Yes : <input type="checkbox"/> No
3. Consumer Durable/PC	: <input type="checkbox"/> Yes : <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2.	: <input type="checkbox"/> Yes : <input type="checkbox"/> No
4. Business	: <input type="checkbox"/> Yes : <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	: <input type="checkbox"/> Yes : <input type="checkbox"/> No
5. Loan Against Shares	: <input type="checkbox"/> Yes : <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	: <input type="checkbox"/> Yes : <input type="checkbox"/> No
6. Insurance Policy	: <input type="checkbox"/> Yes : <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	: <input type="checkbox"/> Yes : <input type="checkbox"/> No
7. Travel Abroad	: <input type="checkbox"/> Yes : <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	: <input type="checkbox"/> Yes : <input type="checkbox"/> No
8. Educational Loan	: <input type="checkbox"/> Yes : <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	: <input type="checkbox"/> Yes : <input type="checkbox"/> No

How you came to know about us ? _____

Any other information you wish to share with your bank _____

You May send promotional material - yes/No

I affirm-that ,information furnished herein above is true and authentic to the best my knowledge.

Date

Signature