

(REG. NO. 29770)

OLD R-5 SHED, BEHIND RLG, BARC TROMBAY, MUMBAI-400 085

LAKHAPATI SCHEME FORM

Sir,

Please open a Lakhapati Scheme Deposit account in my name and deduct the monthly contribution from my salary.

Date:

Yours faithfully,

Signature

CHAIRMAN / SECRETARY

(FILL IN ALL THE PARTICULARS IN THE BOXES IN BLOCK LETTERS USE ONE BOX FOR ONE ALPHABET ONLY LEAVING ONE BOX BLANK EACH WORD. DO NOT SPLIT THE WORD. USE NEXT LINE.

1 NAME OF THE APPLICANT IN FUL	1	NAME	OF THE	APPLICANT	IN FULL
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ACCOUNT OPENED BY

2	DESI	ESIGNATION 3 DIVISION													4 EMPLOYEE NO.										
5	COMPUTER CODE NO.															6	ME	MBEI	RSHI	P NC).				
7	DATE OF BIRTH AGE														8 DATE OF SUPERANNUATION										
-																									
9	9 AMOUNT OF CONTRIBUTION														10 COMMENCING FROM										
11	11 NAME OF NOMINEE WITH RELATIONSHIP																								
12	2 ADDRESS OF THE APPLICANT																								
CONTACT NO. SIGNATURE OF APPLICANT																									
OFFICE USE ONLY																									
	ACC	OU	NT ()PEN	ED (ON				AC	COU	INT I	NO.					DED					CTE	D FR	OM
[]																			THE	SAL	ARY	OF			
DATE OF MATURITY AMOUNT OF MATURITY																									
										₹.															

MANAGER