

People's Urban Co-operative Bank Ltd. No. 51,

TRIPUNITHURA

R. D. a/c.

No.

Place.....

Date.....

To

People's Urban
Co-operative Bank Ltd. No. 51,
Tripunithura

Dear Sir,

Please open in the name/s shown overleaf a Recurring Deposit Account of monthly deposit in the denomination of Rs..... (Rupee.....) formonths I/ We tender herewith Rs.....(Rupee.....) being the initial deposit.

I/ We have read and understood the rules governing your Recurring Deposits and agree to abide by the same.

Yours faithfully,

Signature of the Applicant.

(P. T. O.)

Full name/s and address/es of Depositor/s. State also the name of guardian & date of birth if minor.

Two signature/s of Depositor's guardian if minor.

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1
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2
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2
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Introduced by

Conditions of Payment
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Date :

Branch Manager