



Affix latest passport size photograph & sign across photograph Ignore if already submitted.	Affix latest passport size photograph & sign across photograph Ignore if already submitted.	Affix latest passport size photograph & sign across photograph Ignore if already submitted.
1 st Applicant	2 nd Applicant	3 rd Applicant

I/We apply for placement/renewal of deposit at _____ Branch for a period of _____ months and will earn interest @ _____ % p.a. The payment details are as under:

Payment Details: Cheque Draft RTGS/NEFT UTR No. _____

Cheque No. _____ Date _____ Amount (₹) _____

Bank Name _____ Branch _____

PNB HFL Deposit Receipt No. (in case of renewal) _____ Maturity Date _____

Deposit Scheme: Cumulative

Non-Cumulative: Monthly Quarterly Half Yearly Annual

Applicant's Name (in block letters) _____ Gender M/F _____ Date of Birth (DD/MM/YY) _____

	1	2	3
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

Parent's or Guardian's Name (in case of minor) _____

Senior citizen (above 60 years) Yes No PAN _____

Address of Applicant

House/Flat No. _____ Building Name _____ Road No./Name _____ City _____ State _____ Tel. _____ E-mail _____

Pin Code _____ Country _____ Mobile _____ STD Code _____

Status of the Depositors:

Resident Individual Domestic Company HUF NRI Co-operative Society PNB HFL Employee Association of Person Trust

Repayment Instruction: First Applicant First Applicant or Survivor Any one or Survivor

Whether tax to be deducted: Yes No

If No please submit: Form 15H/15G Order u/s 159 Notification u/s 10

Self-attested copy of identity and address proof of all depositors is mandatory to be enclosed.

PAN _____ Aadhar Card No. _____

Passport No. _____ Ration Card/ Driving License _____

or any other proof to the satisfaction of the company (such as electricity bill, telephone bill etc.)

Existing Depositors: Deposit Number _____ Branch _____

Dispatch of Fix Deposit Receipt

By Post By Courier By Hand By Broker

Declaration:

1. I/We have read and understood and agreed to abide by the stipulated terms and conditions. I/we declare that the first named depositor in our application is the beneficial owner of the deposit and as such he/she should be treated as the payee for the purpose of deduction of tax under section 194A of the Income Tax Act, 1961. I/We declare that this deposit does not represent funds borrowed or deposit taken from third parties.

2. I have gone through the financial and other statements/particulars/representation/furnished/made by the company and after careful consideration I am making deposit with the housing company at my own risk and volition.

Declaration:

3. I/We declare that, I/We am/are authorized to make this deposit in the above-mentioned scheme (PNBHFL Deposit) and that the amount kept in the deposit is through legitimate source and does not involve directly or indirectly any proceeds of schedule of offence and/or is not designed for the purpose of any contravention or evasion of the provisions of the Prevention of Money Laundering Act, 2002 and any Rules, Regulations, Notifications, Guidelines or Directions thereunder, as amended from time to time. I/We shall provide any further information and fully co-operate in any investigation as and when required by the company in accordance to the applicable Law. We further affirm that the information/details provided by us are true and correct in all respect, no part thereof is false and nothing has been concealed.

Bank details for repayment

Bank Name		Branch Location	
Account Number		Type of Account	<input type="checkbox"/> Saving <input type="checkbox"/> Current
IFSC		MICR	

Nomination Form (Optional)

I/We _____ nominate the following person to whom in the event of my/our/minor's death, the amount of the deposit, particulars whereof are given, may be paid by the company.

Nominee Name			
Address	(✓if same as applicant)		
House No.			
Building Name			
Road No./Name			
City		PIN Code	
State		Country	
Tel.	STD Code	Mobile	

Relationship with Depositor (if any)	Age of Nominee	Date of Birth of Nominee (if minor)

As the nominee is a minor on this date, I/We appoint Shri/Smt./Kum. _____ to receive the amount of the deposit on behalf of the event of my/our/minor's death during the minority of the nominee.

Signature of 1st Applicant Signature of 2nd Applicant Signature of 3rd Applicant Signature of Witness (in case of nomination)

Date: _____ Place: _____

In case of non-individual depositor, please furnish the following information.

Name(s) of the authorised signatories	Designation	Specimen Signature(s)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Registered Office Address: 22, 9th Floor, Antriksh Bhavan, Kasturba Gandhi Marg, New Delhi-110001

CIN: U65922DL1988PLC03385

Broker's Stamp Code

