

Please fill up the form in CAPITAL LETTERS. Fields marked * are compulsory

Date: dd/mm/yyyy

Applicant Personal Details

Customer Type:* ☐ Minor ☐ Public ☐ Pensioner ☐ TBL Staff

Account Number:*

Salutation:* ☐ Lyonpo ☐ Dasha ☐ Aum ☐ Mr ☐ Mrs ☐ Others.....

Customer Name:*

Nationality:* Gender: ☐ Male ☐ Female

ID Type:* ☐ CID ☐ Work Permit ☐ Passport ☐ Other (Specify):

ID Number:* Mobile No:*

Email ID: Tax Payer Number:

Permanent Address

House No:* Thram No:* Village:*

Gewog:* Dungkhag: Dzongkhag:*

Employment and Income Source

Source(s) of Income/Fund:* ☐ Salary ☐ Rental Others:

Gross Annual Income:* ☐ 0-100,000 ☐ 100,001-300,000 ☐ 300,001-500,000 ☐ 500,001-Above

Employment:* ☐ Employed ☐ Self Employed ☐ Unemployed Other(Specify):

Name & Address of Organization:

Current Designation: Employee ID:

If Unemployed, C/O Name:

CID No.:

Relationship:

Address:

In the event of my death, I hereby declare the following nominees as the legal representatives for all the Account(s): Savings Account or Term Deposit account or Recurring Account or Safe Deposit Locker maintained with your Bank in the name of..... and Account Number(s)

Nominee	CID/Passport No	Contact No	Relation	Percentage

I. He/she also has the right to withdraw the balances lying therein, after the adjustment of any outstanding/s with this bank & receive the contents in the Safe deposit Locker.

II. He/she has the absolute right to close any of the accounts or claim for contents in Safe Deposit Locker.

III. I have read and understood the procedure for legal claim from my Deposit accounts maintained with this Bank.

IV. This Bank shall not be liable, once the payment/contents are made/delivered to the nominee as per the nomination details provided/declared above.

The nomination list maybe revised at any time during the currency of the account, by providing a written application to the bank.

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Consent and Declaration

I/We hereby confirm that the information provided is true and accurate to the best of my/our knowledge at this time and shall be fully liable if proven otherwise. In case of any changes in the information provided, I/We undertake to inform the Bank promptly.

I/We have read the and understood the Terms & Conditions and also hereby agree to be bound by the rules and regulations governing the maintenance of accounts with the T Bank Ltd (the Bank) in force and as amended by the Bank and/or the Royal Monetary Authority of Bhutan from time to time. I/We also agree to the disclosure of my account information as required by the regulatory authority and laws of the Kingdom.

Signature(s):

Date:

legal Stamp

Witness:

Signature of witness:*

Name:*

CID No:*

Present Address:*

Permanent Address:*

.....

Bank Use

Processed by:

Verified by: