

Please fill the form in CAPITAL LETTERS only. All fields marked * are COMPULSORY Thimphu Branch

Customer ID

PRODUCT CHOICE (Tick appropriate check box)

The Manager, T. Bank Ltd,

I/We Mr/Mrs/Miss _____ would like to avail the following products from your bank.

- Savings Account
 Current Account
 Term Deposit
 Recurring Deposit

MODE OF OPERATION

- Single
 Jointly
 Either or Survivor

CUSTOMER INSTRUCTIONS FOR FIXED DEPOSITS

Initial Deposit Details : Nu./INR _____ (amount in words) Cash Cheque Transfer

Cheque No. _____ Drawn on _____ Amount in figures _____

Term Deposit Tenure _____ Years _____ Months _____ Days Interest Rate _____ Value Date

DD MM YY

Frequency of Interest Redemption

- Auto Renewal
 Redeem interest Quarterly
 Credit Account No.
- Renew with Principal
 Renew Principal only
 Redeem interest on Maturity

CUSTOMER INSTRUCTIONS FOR RECURRING DEPOSITS

Installment Amount _____ (Amt in words) Interest Rate _____

Tenure _____ Years _____ Months _____ Days Mode of Installment Payment Manual Payment Auto Payment

MINOR NOMINATION

I/ We nominate the following person to whom in the event of my/ our/ minor's death, the deposited amount in this account which is being opened, be returned by _____ Bank

Date of Birth (Mandatory in case of minor) Name of the minor

Relationship with the depositor _____ Relationship details provided Yes No

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

Guardian's Address _____

Name of witness 1 _____ Name of witness 2 _____

Signature** _____ Signature** _____

Address _____ Address _____

Place _____ Date _____ Place _____ Date _____

* when the deposit is made in the name of a minor, the nomination must be signed by a person lawfully entitled to act on behalf of the minor.

** Thumb impressions shall be attested by two witnesses

SIGNATURES, PHOTOGRAPHS AND ACCEPTANCE

Please paste your passport size photograph with signature across

Name _____

Date _____

Signature/Thumb Impression

Please paste your passport size photograph with signature across

Name _____

Date _____

Signature/Thumb Impression

FOR BANK USE ONLY

Sourced by _____ Approved by _____ System maker _____ System checker _____

Account Number