Application Form for Opening Account of Recurring Deposit Scheme

he Sr./Br. Manager	Date:
C. Rly. E.C.C Soc. Ltd	
Ĉ₿ranch	1201
Dear Sir,	1.01
(Name in full in	BLOCK LETTERS as Registered in Railway Books)
DesignationDeparatment	
scheme shall be made by payment in cas	ing Deposit Scheme for 5/3/2/1 years. The Contribution for the sh on or before 3rd of every month by contributing to the saving quest to transfer the amount to the Recurring Deposit scheme.
I am not member of Saving Deposit acc Society.	count, therefore I desire to open Saving Deposit account with the
I am a member of Saving Deposit acco	ount, I would like to enhance the contribution out of which
t be transferr	red to Recurring Deposit Scheme.
Please intimate my account number to th	ne Head of my Department / Divisional Office to enable him to
tart deduction of ₹ per mo	onth from my wages.
 I am shareholder of the Society and I am not a Shareholder and I hereby by the rules of the Society applicable to Nenrolling myself as a Nominal member. 	my Share Account No. is agree to become a Nominal member of the society and abide Nominal member. I also remit herewith Rs.5/- being the fees for
) Home Address:	
Tel No. & Mobile N	lo.
c) office Address:	
Tel No	
agree to bound by the Bye-Laws and the Decide to maintain the Account in joint N	e rules Governing Recurring Deposit Scheme. Names as shown below.
also furnish her with Specimen Signatur	es of the joint Account Holders, in your Specimen Signature card
	Yours faithfully,
	(Signature of applicant) (Left Hand Thumb impression he is illiterate)
tef. No. orwarded Deduction of ₹	_will be started only on receipt of your intimation.
lame in full of the depositor	
Specimen Signature of depositor)	

Under Stamp of the office

counter-Signature of the Officer