





SIGNATURE OF THE INTRODUCER

DATE:	TIII.		Admin Offic		l later	IIII DANK	ы			1		die	, <u> </u>			ı	= =	$\overline{}$	$\overline{}$
Dear Sir, Please open a LITTLE CHAMPS BACHAT YOJANA Self operating Saving Bank A/c. for Minor age above 10 ye in my name in the books of the Bank for credit of which I deposit Rs	101-103, Rudresh Commercia				Garden	ı, Chembur, i	Mumbai	i-71.		ميلا ل		)	DA	TE:	D I	M	MY	Υ	Y
Please open a LITTLE CHAMPS BACHAT YOJANA Self operating Saving Bank A/c. for Minor age above 10 ye in my name in the books of the Bank for credit of which I deposit Rs	CCOUNT NO.	$\top$	$\Box$			П		Τ					BRAN	CH:					
Name (Kumar/Kumari) नाव (कुमार/कुमारी) आडनाव नाव विह्यलंघे नाव  Date of Birth जन्मतारीख  Name of the School /College हाळेचे / महाविद्यालयाचे नाव  Name of guardian माव विह्यलंघे नाव  पालकांच नाव पालकांच नाव पालकांच नाव  Tel. No.  INTRODUCTION  I certify that I have known Master / Kumari	Please open a <b>L</b> in my name in th bound by the Ba time to time. The account wil	ie boo ank's r II be o	oks of th rules fo operate	ne Bai or the d by s	nk fo time self [	or cred e being	it of v in fo	which orce or the	ch I d for th	eposit ne con nt of m	Rs iduct o	of su	uch acco	ount a	I ag nd whi	gree to ich ma	comply y come	y with e in ford	and ce fro
Pate of Birth जिस्मार/कुमारी) आडनाव नाव विडलांचे नाव फोटो फोटो फोटो फोटो फोटो फोटो फोटो फोट	l furnish the follo	wing	details	:															
Name of the School /College	•		i)									वरि	डेलांचे नाव						
Name of guardian				Ι			Ι										फोटो		
पालकाचे नाव वडिलांचे नाव पालकांचा फोटो  Residential Address  घरचा पत्ता  Tel. No  INTRODUCTION  I certify that I have known Master / Kumari for the last months/year. I confirm his/her occupation and address as stated in this application.  Name of the introducer A/c. No			_	·												(	Signatuı	re	
Signature  Tel. No  INTRODUCTION  I certify that I have known Master / Kumari for the last months/year. I confirm his/her occupation and address as stated in this application.  Name of the introducer A/c. No	_	an							<u> </u>			 विः	डेलांचे नाव			τ		ग्र	
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Introducer Customer ID	I certify that I ha	ve kn , mont	own Ma ths/yea	aster ar. I cc	onfirr	m his/h	ner o	ccup	patio	n and	addre	ess	as state	d in thi	is appl	icatior	٦.		
	Introducer Cust	lomer	· ID								_								

## **NOMINATION FORM DA-1**

op. Bank's (Nominat	Section 45 ZA read with Section 56 of the Bition) Rules, 1985 in respect of Bank Depos	sit.	, 1949 and	d Rules 2 (1) of the Co-
	(Name(s)&Ao ing person to whom in the event of my/o are given below, may be returned by <b>T</b> Branch.	ur minors death the a		•
Nature of Deposit & Account No.	Name & Address of Nominee	Relationship with Depositor, if any	Age	Date of Birth in case of minor
to receive the amount of the nominee Place: Witness (es): Signal Name(s) Address(es)  1. Where deposit is be signed by a position of the amount of the amount of the nominee	(Name, Address & Agent of the deposit on behalf of the nominee in the deposit on behalf of the nominee in the company of the sin the name of minor the nomination shows a sin the name of minor the name	e) In the event of my/our/r	ninor's de re(s)/Thu	
Photographs ob Applicant's & int Introducer's sign	FOR OFFICE  Check List for documents required from School/Collage/Ration Card/Aartained, affixed & signed in my presence roducer has/have signed in my presence nature Verified. Confirmation sent on	ired for Account open dhar Card Office	r/Br. Mgr.	