MAHESAN PARASPARA SAHAYA NIDHI LIMITED

ApplicationSL No

No.249, North Street, Melpagam, Darasuram KUMBAKONAM 612702
(Incorporated Under the Companies Act, 1956)

Customer Folio No.

Applicaton For FD ☐ CD ☐ SD ☐ RD ☐ DDS ☐

Individua ☐ Either or servivor ☐ Anyone or servivor ☐ Joint ☐ Minor ☐

(Affix Passport Size Photo here)

1st Depositor

*Name D.O.B./Age

Father / Husband Name

*(In Case of Minor) Guardian's

First Depositor Address :

Cell No. | Email | Pan No.

2nd Depositor

Second Depositor Name : D.O.B./Age

Father / Husband Name :

Deposit

Amount . Rupees

Cash / Cheque / D.D. / P.P.No..... dt.:..... on. ..... Bank

Transfer from Deposit No. Dep Proceeds + Additional Amount

Advice From Branch Date for

Period | Months | Income Tax 15G | 15H | NA

Interest Payments

Annually

Monthly

Quarterly

Year Yearly

☐ Through Savings Deposit A/c No. .at. ..Branch.

☐ Through .....Bank. .....Branch

Signature of I Depositer	1	1
II Depositer	2	2

Office Notes

Deposit A/C No.	Deposit Receipt No.	Amount & Rate of Int	Date Of Issue	Maturity Date & Maturity Value

Clerk Officer Manager

Form DA 1 - NOMINATION under Section 45 QB of the Reserve Bank of India Act, 1934 as amended read with Section 45 ZA of the Banking Regulation Act, 1949 and Rule 2(1) of Banking Companies (Nomination) Rules, 1985 in respect of deposits with non-banking financial companies.

I/We.... .....

nominate the following person to whom in the event of my/our/minor's death the amount of deposit, particulars where od are given below may be returned by the Mahesan Paraspara Sahaya Nidhi Limited(Address as above)

Deposit		Nominee			
Nature of A/c	Distinction No.	Additional Details if any	Name & Address	Relationship with Depositors	Age: I\if nominee is a minor .his/her date of birth