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| REGISTERED OFFICE:  “Knowledge house”.Shyam nagar.office ab    Gysdgyufjf    Gcdhchukf    Hgczhjdg | FD Department:  Gyusdfbv  Hujgyfb  JDBC  Ghsdguis  Hjyhsuifhsd |

FELFUTURE

  ENTERPRISES

LTD.  **Application form no.**

|  |  |  |  |
| --- | --- | --- | --- |
| APPLICATION FORM FOR FIXED DEPOSIT SCHEME | | | |
| (Please write in BLOCK LETTERS and check P in the appropriate box) | | | |
| Existing customer ID No. (12512)  Applicable if existing FD Holder |  | Store cards /broker  Name & Stamp |  |

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| FRESH DEPOSIT (in multiples of  1,000/- with a minimum of   10,000/-) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Rupees (in fig.) | | | | | |  | |  |  |  | | | | |  | | | Cheque/DD no. | | | | | |  | | |  | Date | | |  | | | | | | | | | | | |  | | | | | | | | | | | |
| Rupees (in words) | | | | | |  | |  |  |  | | | | |  | | |  | |  | | |  | | |  |  |  |  | |  | | |  | | | | | | | | |  | | | | |  | | | | | | |
|  |  |  |  | |  |  |  |  |  |  | |  | |  | |  |  | | |  | |  |  |  | |  |  | Drawn on (Bank/Branch) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Debit card memo no. | | | | | | | | RTGS/NEFT transaction ID No. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cash | | | |  | | | | Max. up to 20,000/-p.a. per depositor ,refer to point no. I(8) of the T&C of the  Scheme ) | | | | | | | | | | | | | | | | | | | | Cash memo no. | | |  | | |  | | | |  | | | | |  | |  | | | |  | | | | | |
| Scheme code | | | | | | | | Cumulative CS1 | |  | | | CS2 | | | | |  | | CS3 |  | | | | Non-Cumulative  ve NS1 | | |  | NS2 | |  | | | NS3 | | | | | | | |  | | | | |  | | | | | | | |
| Status of first applicant | | | | | | | | Resident individual                  HUF                Firms            Company                 Trust | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Special category** ( Refer to the point no. X(10) of the T&C of the Fixed Deposit Scheme) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Senior citizen (60yrs and above ) | | | | | | | | | | | Member  (Shareholder) | | | | | | | | | | | | | | | | | Folio no./DO ID &Client NO. | | | | | | | |  | | |  | | | |  | |  | | | |  | | |  | |  |
| Member of Future Group Customer Loyalty  Program | | | | | | | | | | | Employee | | | | | | |  | Employee code | | | | | | | | |  | |  | | |  | | | | | | | |  | | | | | | | | | |  | | | |
| Future pay big bazaar profit club Easyday Saving Club | | | | | | | | | | | | | | | | | | | | | | | | | | | | Reg.mobile no. | |  | |  | | |  | |  | | |  | | | |  | |  | | | |  | | |  |  |
| Mode of insurance of Receipt : Physical Digital | | | | | | | | | | | | | | | | | | | | | | | | | | | | (The deposit receipt will be issued in physical form unless the applicant has opted for issuance of FDR in digital form) | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| NAME OF APPLICANTS SURNAME | | | | | | | | | | | | | | | | | | | | FIRST NAME | | | | | | | | | | | MIDDLE NAME | | | | | | | | | | PAN(mandatory for all applicants) | | | | | | | | | |
| Sole/first: | | Mr./Ms. | | | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| Second: | | Mr./Ms. | | | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| Third: | | Mr./Ms. | | | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| Name of the Guardian  (if first holder is minor) | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| Date of Birth of Sole/first Applicant | | | | | | | DD/MM/YYYY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ADDRESS AND OTHER DETAILS OF SOLE/FIRST APPLICANT (RECEIPTS & COMMUNICATION WILL BE SENT ON THIS ADDRESS) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LINE 1: |  | |  |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  |  | |  | |  | |  | | |  | |  | |  | |  | |  | | |  | |  | |  | |  |
| LINE 2: |  | |  |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  |  | |  | |  | |  | | |  | |  | |  | |  | |  | | |  | |  | |  | |  |
| CITY |  | |  |  |  |  | |  | |  | |  | |  | |  | |  | |  | | Pin |  | |  | |  | |  | | |  | |  | |  | |  | |  | | |  | |  | |  | |  |
| STATE |  | |  |  |  |  | |  | |  | |  | |  | | Tel. | |  | |  | |  |  | |  | |  | |  | | |  | |  | |  | |  | |  | | |  | |  | |  | |  |
| Email |  | |  |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | Mobile no. | | | | | |  | | |  | |  | |  | |  | |  | | |  | |  | |  | |  |

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| BANK ACCOUNT DETAILS OF THE SOLE/FIRST APPLICANT | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bank |  |  |  |  |  |  |  |  |  |  |  |  | Branch | | | |  |  |  |  |  |  |  |  |  |  |  |  |
| Current/saving account no. | | | |  |  |  |  |  |  |  |  |  |  |  |  |  | MICR code | | |  |  |  |  |  |  |  |  |  |
| IFSC CODE |  |  |  |  |  |  |  |  |  |  |  |  | (Please attach the cancelled cheque for verification) | | | | | | | | | | | | | | | |

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| PROVISIONAL RECEIPT | | |
| Reg. office:  Ftdfagdcajwhytdgjhvs  Gsjgdjsgchs  vshfsn | FD Department:  Gyudwrtriywgv  Huidtgfhwegd  Hifuedgc | Application no. |
| Received with thanks from Mr./Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_amount\_\_\_\_\_\_\_\_\_\_(Rupees\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_only)via Cash/debit card/RTGS/NEFT Transaction Ref.no. /Cheque no./DD no.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Dated \_ \_/ \_ \_/\_ \_ \_ \_ drawn on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Branch\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(subjects to realisation)towards scheme no. CS1/CS2/CS3/NS1/NS2/NS3 | | |

Nominee Details : Name of the Nominee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_(years)

Receipt Date: \_ \_/ \_ \_/\_\_\_\_\_\_\_\_\_\_\_ Authorised Signatory