



CHENNAI ANNA NAGAR CO-OPERATIVE HOUSING SOCIETY LTD

(Registration No: MSCS/CR/1219)

Member No:

Recurring Deposit No:

APPLICATION FORM FOR RECURRING DEPOSIT

Please tick the choice

☐ Cumulative ☐ Monthly ☐ Quarterly ☐ Half-Yearly

I / We hereby apply for Fixed Deposit of ₹(Rupees in words

.....) for a period ofmonth at.....% per annum interest

please tick the choice ☐ Fresh ☐ Renewal (Fixed Deposit No.....Date.....) Amount ₹

☐ Cash ☐ Cheque Cheque No..... Date..... Name of Bank.....

NAME, ADDRESS AND OTHER DETAILS AS REQUIRED IN FD RECEIPT (IN BLOCK LETTERS)

Name.....

Date of Birth.....Age.....

Nominee Name with Relationship.....

Address.....

Land Line No/Mobile No.....Email ID.....

BANK DETAILS FOR THE PAYMENT OF INTEREST AND PRINCIPAL

Name in Full

Bank Name and Branch

Bank Account No.....IFSC code No

I / We hereby declare that the particulars given are correct and complete. We have read and understood the terms and condition of the CENNAI ANNA NAGAR CO-OPERATIVE HOUSEING SOCIETY LTD Recurring Deposit Scheme and the same are acceptable to me / us. I/We also declare that above information is true to the best of my / our knowledge and belief.

Your Truly

Signature

CHAIRMAN