



FOR CRM LEAD NUMBER IN CBS (To be filled by Bank)

| CRM Lead Number | Lead No. entered in CBS | Yes |
|-----------------|-------------------------|-----|
| For B.O.        |                         |     |
| Signature       |                         |     |

Signature 9968002100010984

2968002100010975  
RUCTION PVT LTD-KAPIL

RESIDENCY

| Trust                    | Society                  | HUF                      | others (specify) |
|--------------------------|--------------------------|--------------------------|------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                  |

|                |   |   |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|---|---|
| 3. PAN/GIR no. | A | A | E | C | A | 0 | 8 | 3 | 2 | B |
|----------------|---|---|---|---|---|---|---|---|---|---|

I/we agree to be bound by the bank's rules in force from the date of the opening of the account.

| (To be filled in Block Letters)     |                                                                              | (C) Current Account  |
|-------------------------------------|------------------------------------------------------------------------------|----------------------|
| Savings Fund Account (specify)      | (B) PNB Prudent Sweep SF (Sweep In and Out Facility Required for ..... days) |                      |
| PNB Smart Roamer Current Account    | (E) Recurring Deposit                                                        | (F) Others (Specify) |
| In and Out Facility for ..... days) | Monthly Installment Rs. ....<br>No. of Installments ..... %                  |                      |
|                                     | Interest rate ..... %                                                        |                      |
|                                     | (H) Term Deposit (FD) #                                                      |                      |
|                                     | Interest rate ..... %                                                        |                      |
|                                     | (I) Term Deposit/Tax saver/other FDs (specify)                               |                      |
|                                     |                                                                              |                      |

| Amount Rs.                                                   |  | Period: Year                                                         |             | Months    |         | Days |  | Interest Rate:                          |                                |
|--------------------------------------------------------------|--|----------------------------------------------------------------------|-------------|-----------|---------|------|--|-----------------------------------------|--------------------------------|
| Interest payment frequency (Pl. tick in the appropriate box) |  | Annually                                                             | Half Yearly | Quarterly | Monthly |      |  | Account No.                             | Credit interest to B/C/A/CO-OD |
| On maturity                                                  |  |                                                                      |             |           |         |      |  | Credit maturity proceeds to B/C/A/CO-OD |                                |
|                                                              |  |                                                                      |             |           |         |      |  | Account No.                             |                                |
|                                                              |  | If no. exemption reference No.                                       |             |           |         |      |  | YES <input type="checkbox"/>            | NO <input type="checkbox"/>    |
|                                                              |  | TDS, if applicable: Yes/No                                           |             |           |         |      |  |                                         |                                |
|                                                              |  | If Yes, Whether Form 15 G/H* submitted: YES <input type="checkbox"/> |             |           |         |      |  |                                         |                                |
|                                                              |  | Period for which Auto renewal required                               |             |           |         |      |  |                                         |                                |
|                                                              |  | Period for which Auto renewal required                               |             |           |         |      |  |                                         |                                |
|                                                              |  | No. of times                                                         |             |           |         |      |  |                                         |                                |
|                                                              |  | Form 15G for general category, 15H for Senior Citizen                |             |           |         |      |  |                                         |                                |
|                                                              |  | * Form 15G for general category, 15H for Senior Citizen              |             |           |         |      |  |                                         |                                |
|                                                              |  | Borrower for                                                         |             |           |         |      |  |                                         |                                |
|                                                              |  | Term for                                                             |             |           |         |      |  |                                         |                                |
|                                                              |  | Interest rate                                                        |             |           |         |      |  |                                         |                                |
|                                                              |  | Period for which Auto renewal required                               |             |           |         |      |  |                                         |                                |
|                                                              |  | No. of times                                                         |             |           |         |      |  |                                         |                                |