

A.P.S.R.T.C. EMPLOYEES'

Thrift & Credit Co-operative Society Limited
Satyanarayana Reddy Marg, Azamabad, Hyderabad- 500 020. A.P.
Regd No. 20604

RECURRING DEPOSIT ACCOUNT APPLICATION FORM

To
THE SECRETARY,
APSRTC ET & CCS Ltd.,
HYDERABAD-500020.

For Office Use Only	
R.D. A/c No.....	
on	
Member	Secretary

Dear Sir,

I wish to deposit Rs.....per month in Recurring Deposit Scheme for ----- months. The Rules and Regulations governing the Scheme have been read by me and agree to be bound by the same Rules.

I authorise the A P S R T C E T & C C S Ltd. to recover the monthly instalments from my salary.

I therefore request you to arrange to advise my salary disbursing officer to arrange to recover the amount mentioned above from my salary every month.

I hereby nominate Sri/Smt/Kum..... Relationship.....who shall be entitled to receive the amount in my Recurring Deposit account in case of my death.

Thanking you .

Yours faithfully,

Signature

Date.....

Residential Address

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.....

Depositor's Name.....

Staff No:.....Designation.....

Depot/Unit.....

Name of Paysheet.....

Declaration to be signed by the Guardian in case of an account in the name of minor.

I hereby declare that I am the natural/legal defacto guardian of the minor in whose name the Recurring Deposit account is opened by me and that the age of the said minor today is years. The minor attains majority on

