



..... Branch

**Recurring Deposit Account**

Date 

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Dear Sir,

I/We request you to open Recurring Deposit Account in the name of Mr./Mrs./Ms. ....  
 ..... with the following terms and conditions.

Amount Rs .....

Tenure .....

Please debit my account number..... every month by amount  
 ..... (In words.....) till my  
 tenure.

I/we hereby agree to abide by and comply with all the terms, conditions and authorization of the banking service. If  
 I/we fail to comply with any such terms and conditions, leading to any damages incurred as a consequence thereof,  
 I/we agree to be fully and entirely responsible.

Account Holders Name

Signature

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**FOR BANK USE ONLY**

Recurring Deposit Account No. ....

1. Initial Collection Date: .....

2. Last Collection Date: .....

3. Expiry Date: .....

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Prepared By

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Approved by