SOUTH CENTRAL & SOUTH COAST RAILWAY EMPLOYEES' CO-OP. CREDIT SOCIETY

Sahakara Bhavan, Himmath Nagar, Secunderabad - 500 003.

FIXED DEPOSIT APPLICATION FORM

To,
The Secretary / CEO,
S.C. & S.Co. R. ECCS Ltd.,
Secunderabad - 500 003.

CR No. _____ CMTD A/c. No. _____

Date _____ S.No. _____

Amount _____ FDR No. _____

Due Date _____

Cashier OS / Secy. Initial _____

I desire to invest in accordance with the rules of the Society at _____% P.A. for a

period of _____ years _____ Months _____ days a sum of Rs. _____

Rupees _____

in your Society as Fixed Deposits, please accept the deposit as under:

Full Name _____ Designation _____

Office Address _____

_____

Conditions: **MONTHLY INVESTMENT PLAN (MIP)** ☐ **RE-INVESTMENT PLAN (RIP)** ☐

I request you to pay the interest due Monthly / on Maturity / RIP

Names (Authorised persons) Yours faithfully

Bank Particulars _____ 1. _____

Cheque No. / UPI _____ 2. _____

Amount _____ 3. _____

Cheque cleared on _____ Signatures of the Depositor

PAN No. _____ MIP Cheque's issued :

Aadhar No. _____ 1. _____

Cell No. _____ 2. _____

3. _____

FIXED DEPOSIT CONDITIONS

1. The Society is **not bound to give notice of maturity** of Fixed Deposit.
2. Interest will cease from the date of maturity of Fixed Deposit for repayment.
3. If the interest payable during a financial year is above **Rs.50,000/-,** for FD & MSS a TDS of 10% on interest paid will be deducted.
4. For Fore-closure the applicable interest rate will be **reduced by 2.5%** from date of investment.
5. Renewal will not be done automatically.
6. Fixed Deposits are accepted in cash upto Rs.20,000/- for more than Rs.20,000/- can be made through Neft / Cheque.
7. Renewal of Fixed Deposits on maturity is entirely at the option of the Society.
8. The rates of interest offered are subject to the directives issued by the Board of Management from time to time.
9. Mode of Repayment by **NEFT / Cheque.**
10. Along with the application **PAN** and **Aadhar Xerox** copies are mandatory.
11. I agree to the above mentioned conditions.

Date _____ Signature of the Depositor(s)

SOUTH CENTRAL & SOUTH COAST RAILWAY EMPLOYEES' CO-OP. CREDIT SOCIETY LTD. SECUNDERABAD

NOMINATION FORM

I _____Residential Address _____

nominate the following person to whom in the event of my death the amount of deposit, particulars whereof are given below, may be paid by the South Central Railway Employees Co-operative Credit Society Ltd., Sahakar Bhavan, Himmat Nagar (PO), Secunderabad - 500025.

DEPOSIT		NOMINEE				
Nature of Deposit	FDR No.	Name of the Nominee	Address of the Nominee	Relationship with Depositor, if any	Age	If nominee is a minor his D.O.B & Aadhar details

★ As the nominee is a minor on this date, I/We apoint Sri/Smt./ Kum _____

_____

to receive the amount of deposit on behalf of the nominee in the event of my death during the minority of the nominee.

★ Minor nominee's documentary evidence to be furnished.

Name, Signature and address of Witness	
1.	2.

Date: Signature / Thumb impression of Depositor

FOR OFFICE USE ONLY

S.No.	Closed FDR No.	Maturity Amount	TDS	Date of Maturity	New FDR No.	Amount	Date	Remarks