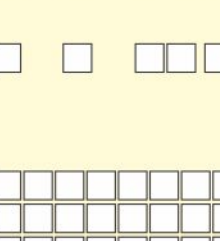




**RR INVESTOR'S RETAIL SERVICES PVT.LTD.,  
47 M.M ROAD RANI JHANSI MARG,  
NEW DELHI- 110055,**

# Ghar Ki Baat

**Regd. Off. : 9th Floor Antriksh Bhawan, 22 K.G. Marg, New Delhi - 110001**

<b>Applicant's Name (in Block Letters)</b>															<b>Gender</b> M/F		<b>Date of Birth</b> (DD/MM/YY)			<div style="border: 1px solid black; padding: 10px; width: 100px; height: 100px; margin: 0 auto;">  </div> <p>Photo 1st Depositor</p>
1. <input type="text"/>															<input type="text"/>		<input type="text"/>			
2. <input type="text"/>															<input type="text"/>		<input type="text"/>			
3. <input type="text"/>															<input type="text"/>		<input type="text"/>			
<b>Parent's or Guardian's Name (in case of minor)</b>																				
<input type="text"/>															<input type="text"/>		<input type="text"/>			
<b>Senior Citizen (Above 60 Years)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No																				
<b>Address of Applicant</b>																				
Flat No. <input type="text"/>																				
Bldg. Name <input type="text"/>																				
Road No./Name <input type="text"/>																				
City <input type="text"/>															PIN Code <input type="text"/>					
State <input type="text"/>															Country <input type="text"/>					
Tel. <input type="text"/>															STD Code <input type="text"/>					
E-mail <input type="text"/>															Mobile <input type="text"/>					
<b>Payment Details</b> <input type="checkbox"/> Cheque <input type="checkbox"/> Draft <input type="checkbox"/> RTGS <input type="checkbox"/> Deposit Receipt No. <input type="text"/>																				
Cheque No. <input type="text"/>															Date: <input type="text"/>					
															Amount: ₹ <input type="text"/>					
Bank Name <input type="text"/>															Branch <input type="text"/>					
															Amt. Words <input type="text"/>					
Period (Months) <input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> 72 <input type="checkbox"/> 84															Interest option <input type="checkbox"/> Half Yearly <input type="checkbox"/> Cumulative					
<b>Status of the Depositors :</b>																				
<input type="checkbox"/> Resident Individual <input type="checkbox"/> HUF <input type="checkbox"/> Cooperative Society <input type="checkbox"/> Association of persons <input type="checkbox"/> Trust																				
<input type="checkbox"/> Domestic Company <input type="checkbox"/> Staff																				
<b>Repayment instruction</b> <input type="checkbox"/> First Applicant <input type="checkbox"/> First Applicant Or Survivor <input type="checkbox"/> Any one or Survivor																				
<b>Whether Tax to be deducted</b> <input type="checkbox"/> Yes <input type="checkbox"/> No																				
<b>If No please submit</b> <input type="checkbox"/> Form 15H/15G <input type="checkbox"/> Order u/s 159 <input type="checkbox"/> Notification u/s10																				
<b>Mandatory Identity and address proof 1st depository only (Enclose Photo copies of both) (Self attested)</b>																				
<b>IT / Pan No.</b> <input type="text"/> <b>Election ID No.</b> <input type="text"/>																				
<b>Passport No.</b> <input type="text"/> <b>Ration Card / Driving Licence</b> <input type="text"/>																				
<b>or any other proof to the satisfaction of the Company (such as electricity bill, telephone bill etc.)</b>																				
<b>Particulars of other deposits</b> <input type="text"/>																				
<b>Declaration:</b>																				
1. I/We have read and understood and agreed to abide by the stipulated terms and conditions. I/we declare that the first named depositor in our application is the beneficial owner of the deposit and as such he/she should be treated as the payee for the purpose of deduction of tax under section 194A of the Income tax Act, 1961. I/We declare that I am/ We are resident(s) of India and are not depositing this amount as nominee(s) of any person residing outside India. I/We declare that this deposit does not represent funds borrowed or deposit taken from third parties.																				
2. I have gone through the financial and other statements/particulars/representation/furnished/made by the company and after careful consideration I am making deposit with the housing company at my own risk and volition.																				

<b>Bank Details</b>																															
Bank Name																Branch Location															
Account Number																Type of Account	Savings					Current									
IFSC Code																MICR Code															

I/We \_\_\_\_\_ nominate the following person to whom in the event of my/our/minor's death, the amount of the deposit, particulars where of are given, may be paid by the company.

[illegible]

Deposit Receipt No.	Relationship with Depositor (if any)	Age of Nominee	Date of Birth of Nominee (if Minor)

As the nominee is a minor on this date, I/We appoint Shri/Smt./Kum. \_\_\_\_\_ to receive the amount of the deposit on behalf of the event of my/our/minor's death during the minority of the nominee.

Signature of 1st Applicant	Signature of 2nd Applicant	Signature of 3rd Applicant	Signature of witness (in case of nomination)

Date : \_\_\_\_\_ Place: \_\_\_\_\_

In case of non-individual depositor, please furnish the following information.

Name(s) of the authorised signatories	Designation	Specimen Signature(s)
1. _____	_____	_____
2. _____	_____	_____

FOR OFFICE USE ONLY

Application No.

[illegible]