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\$ Thumb impression(s) shall be attested by two witnesses.

1 LAKSHMI VILAS BANK	NO.	N-RESIDENT A	ACCOUNT O	DENINC I	EODM
(For Office Use - Please quote this no. for future reference)	NO	N-KESIDEN I A	ACCOUNTO	PENING I	CKM
A			Date: D D	M M Y	YYY
I / We request you to open an account with your			branch.	Total No. of Joi Applicants :	nt
(A) Personal Details:	(If existing custome	er enter the customer ID. F		er the CPF No. ge	enerated)
Full Name of the Applicant 1.		CPF ID (CPF / Customer ID:		
2.					
3.					
(B) Initial Deposit (Pay-In) Details: (Cheque draw		,			
I / We enclose a cheque drawn by me / us on in our favour / on my / our account / have sent y			issued by in your favour	· / on my / our a	ccount / for
· · · · · · · · · · · · · · · · · · ·	t / on realisation / please place in			,	
(C) Account Details: (Mark "X" against appropriate					
NRE NRO FCNR Savings:	RFC Name of the Product	t: (Ex: NRE-SB, FCNR-DCD)		Mode of Accoun	
	Operating Instructio	ns ·		Sole ov	
Current:				Either	or Survivor
Fixed Deposit :				Anyone	or Survivor
Cumulative Deposit (DCD):		(IND LIGH OF	DD FUD AUD OAD	Jointly Debit/ATM car	rd will not be issued)
Recurring Deposit :	Currency:	elect from the list)	BP, EUR, AUD, CAD, PY)	Mandat	te Form
(D) Term Deposit / Interest Payout Details :					
Deposit Period:	Beneficiary Account	Details:			
Months M M Days D D D Interest Payment: Payment Mode:	Account No :				
Interest Payment: Payment Mode: Monthly Credit my Account with y	l Your bank	NAME OF	THE BANK		
i i	J				
Quarterly Issue DD / PO NAME OF THE BRANCH Or Material Issue DD / PO IFS Code :					
On Maturity Credit my account with o	inter bank 11 0 0000 .				
(E) Standing Instruction for Recurring Deposit:					
I/We authorise the Lakshmi Vilas Bank Ltd., to debit monthly installment of (Rupees					
only) from m	y/our operative account				
(F) Nomination Details (Nomination Form DA-1):	(If yes, please give all details in	this section)			
Nomination facility required: Yes	No, I declar	e that I do not wish to make	e a nomination.		
Nomination under section 45Z A of the Banking Regulation	n Act, 1949, and rule 2 (1) of the Ban	king Companies (Nomination)	Rules, 1985,	Nomination not required fo	r this account
in respect of bank deposits. I / We, (name(s)), nominate the following person to whom in the	event of my / our / minor's death the	e amount of the deposit, parti	culars whereof are give	n below, may be re	turned by The
Customer ID, If existing customer Name & A	ddress of the Nominee :	Relationship	Date	of Birth	Age
@ As the nominee is a minor on this date. How associate	Shri/Smt/Kum			to name address	and ago) to
As the nominee is a minor on this date, I/we appoint or receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on behalf of the nominee receive the amount of the deposit on the deposit of the nominee receive the deposit of the deposit of the nominee receive the deposit of the		ath during the minority of the n		to name, address	anu aye) lu
@ Strike out if nominee is not a minor					

Signature (s) /thumb impression of Depositors (s) \$ Signature
The Lakshmi Vilas Bank Ltd, Regd. Administrative Office, Salem Road, Kathaparai, Karur. Pin: 639006.

Page No. 1

\$ Signature of witness (es)

NOMINATION ACKNOWLEDGEMENT	AOF Ref. No.:	
Received on(N	(Date) Nomination Form from ame of the Deposit Holder) in respect of	THE LAKSHMI VILAS BANK LTD.,
	(Name of the Account),	
subject to opening of account at Central Processing Cel	. AUTI Date	THORISED SIGNATORY E:

PRODUCTS OFFERED BY US:

×

- Western Union Money Transfer
- Remit2India
- Xpress Money
- Al-Ahalia Money Exchange
- MoneyGram

- **OUR NR PRODUCTS**
- NRE SB. FD. DCD. RD
- NRO SB, FD, DCD
- FCNR FD, DCD
- RFC SB, CA, FD, DCD

OUR TECHNOLOGY PRODUCTS

3

- Net Banking
- Handypay Mobile Payment
- VISA / Rupay Card
- e-Tax Remittance
- Online Trading (3-in-1 Account)