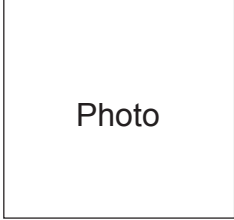


hmbv]m lcPn (NAMT LOAN)



_m]v sk{l«dn AhÄIÄjv
kÄ,

ta,Sn _m]nÄ ln]pw Xmsg hnhcn]pw {}lmcw Hcp ImÄjntIXc ISw hm§phm³ Rm³ Cu
lcPn t_m[n,n]p]p. ISw A\phZnöp Xcp]]£w _m]nsâ kle N«§fpw Flnjv
_m[lambncn]psa]]v CXn\mÄ k½Xn]p]]p.

- 1 {}thi\ \¼Ä ...
 - 2 t]cv
 - 3]nXmhnsâ / `Ämhnsâ t]cv
 - 4 taÄ hnemkw
 - 5 t^m= \¼Ä
 - 6 ho«p \¼Ä hmÄUv\¼Ä.....
 - 7 {}hr¯n
 - 8 F.]WbhkvXphnsâ t]cv
 - (1) Awiw, tZiw
 - (2) kÄtÆ \¼Ä
 - (3) hnkVxoÄ@hpw Ahlmihpw...
 - (4) aXn,phne
 - (5) hmÄjnlmZmbw
- _n. {}Xnamk hcpam\w
kn. FÄm C\§fnÄ ln]pw
lqSn amk¯nepÄ BZmbw

9 \nehnepÄ IS§Ä
F. hkvXp NmÄÖv ISw
_n. l¿mÄ ISw

F{X	BÄjv	Ft,mÄ hm§nbXv

10 ISw At]£n]p]] kwJy
A]¯nepw A£c¯nepw

12 IS nsâ Ah[n]
.....

13 KUpifpsS F@hpw Imehpw
.....

14 ISw Xncn Sbviphm\pÅ amÅw
.....

15]Wb hkvXpsh kw_Ôn hnhcw

lpgniqdv

F®w

aXn,phne

sX§v

lhp§v

hÅn

]nemhv

arhv

]Spacw

Nabw

hSv

aäp sl«nS§Ä

Bsl aXn,phne

16 sslhiapÅ aäp Ømhc hkvXpifpsS hnhcw

Awiw, tZiw

kÀsÆ \¼À

hkvXoÀ®w

aXn,phne

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17. A\cmhlminIÄ

hbÊv

At]£l\pampÅ

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2.....

3.....

4.....

5.....

6.....

\¼Ä UkvShtv k_n. Un. Xmeqjv ^ Ä j J©mb_v Awiw tZiw Xcw AhImiw kÄsÆ do. kÄsÆ G{l skäv	hkvXphnsâ hnhcw	\meXncplÄ			
		Ingjv	hSjv	JSn ^a mdv	sXjv

taÄ {]kvXmhn" kwKXnlÄ kXyamsW¶pw ISw AlphZnjp]£w _m'nsâ kle N«§fpw F\njv / RŞÄjv _m[lambncnipsa¶pw Rm³ / RŞÄ CXnlmÄ k½Xn"ncnjp¶p.

lcPnjmcsâ t]cpwH,pw.....

Loan Application No.....

Date.....

OFFICE NOTE

Name of Applicant M. No. Sri

Name of Surety No.1 M. No. Sri

Name of Surety No.2 M. No. Sri

Shares of the Applicant Rs.

Shares of the Surety No. 1 Rs.

Shares of the Surety No. 2 Rs.

LIABILITY

Applicant as Surety (1) L.No..... Rs..... Over due.....
(2) L.No..... Rs..... Do.....
(3) L.No..... Rs..... Do.....

(4) L.No..... Rs..... Do.....
Surety No. 1 as Borrower L.No..... Rs..... Do.....

as Surety (1) L.No..... Rs..... Over due.....
(2) L.No..... Rs..... Do.....
(3) L.No..... Rs..... Do.....
(4) L.No..... Rs..... Do.....

Surety No.2 as Borrower L.No..... Rs..... Do.....
as Surety (1) L.No..... Rs..... Over due.....
(2) L.No..... Rs..... Do.....
(3) L.No..... Rs..... Do.....
(4) L.No..... Rs..... Do.....

REMARKS OF OFFICE

Clerk

Accountant

Secretary

Resolution No.....

Date.....

Rs.

Sanctioned

Month

Rejected

President

Loan Disbursed.....

'സി / ഡി ക്ലസ്' ഹെഡറിനുള്ള അപേക്ഷാ ഫോറം

- 1 t]cv :
- 2]nXmhnsâ t]cv :
- 3 ho«pt]cv :
- 4 t]mìv Hm^okv :
- 5 PnÃ :
- 6 tZiw :
- 7]©m b⁻v :
- 8 B⁻ / s]⁻ :
- 9 t^m⁻ \¼À :
- 10 CpsabnÂ :
- 11 AhlminbpsS
t]cpw _Ôhpw :
- 12 PmXn :
- 13]cnNbs, Sp⁻Â :
- 14 A`n{]mb§Ä :
- 15 Ø e w :
- 16 Awiw :
- 17 hmÀUv :
- 18 P\ XnçXn :
- 19 tPmen :

sjbdplfpsS F®w : sjbÀ kwJy :l..... {}thi\ ^okv :l..... B s l :l.....

kXy{]kvXmh\: taÂ hnhcn kwKXniÄ kXyamsW¶Xn\mÂ D⁻ahizmks,Sp⁻p¶ tXmsSm,w Fs¶_mìnÂ/kwL⁻nÂ sa¼dmim³ CXn\mÂ At]£n⁻p slmÂp¶p. Rm³ _mw{]vsäm C³tkmÄhtâm AÄ. t]cf kllcW kwLw BlvSns Hcp hlp,p {]lmchpw Rm³ in£njs,«n«nÂ. sa¼dmbn Fs¶ kzolcni p¶]£w t_ìnsâ/kwL⁻nsâ A,t,mgs⁻ \nbamhenlfpw Kerala Co-operative Societies Act 21 of 1969 Dw AXns\ kw_Ön⁻pÄ A,t,mgs⁻ aäp \nba§fpw _m[]hpw k½XhpamsW¶v k½Xn⁻v CXnÂ Isçm,n«ncn ip¶p.

XobXn:..... ~ H,v

Cu t^mdw H,nSp¶Xpl- c-p km£nlfpsS t]cpw hmemkhpw H,pw

- 1)
- 2)

Recommended

Admitted as per R. No..... Date.....

Entered No.....20 M.No.....

President

Director

Secretary

APPLICATION FOR FIXED DEPOSIT

FD No.

Dear Sirs,

Please accept Rs.....

as a FIXED DEPOSIT. Subject to your Rules in the name of (Name of Depositor/s in full with complete Address in Block letters)

for a period of days / months at..... percent interest per annum as repay-
able with interest to *please credit the
quarterly interest of this deposit to my / our S.B. A/c No.....with
your..... please also register my / our nomination as shown overleaf.

Name & Signature of the person }
making the application }

Place:..... Address.....

Date :.....

* Fill up here as, the Depositor either or survivor or the Depositors, any of the Depositors, all the Depositors jointly or any other special condition for repayment, as may be required.

Note: If the Depositor/s is/are making the application the specimen signature may be given below, in other cases specimen signature of the Depositor or Depositors should be filled with the Bank soon, attested by the person making the application or otherwise authenticated.

Introduced by:.....

Signature, Name, Address and account number if any are to be noted.

SPECIMEN SIGNATURE

1) Name..... 2) Name.....

1. 1.

2. 2.

3. 3.

തോതിലലം സഹകരണ നൂറൽ ബാങ്ക് ലിമിറ്റഡ് എം. 668

തൃശ്ശൂർ, ജി. എ. റോഡ്, പാലക്കാട് 673 636

**പിഴവിലെ അടയ്ക്കൽ (NAST LOAN)
പിഴവിലെ അടയ്ക്കൽ**



പിഴവിലെ അടയ്ക്കൽ

കുറവിലെ അടയ്ക്കൽ
പിഴവിലെ അടയ്ക്കൽ നൂറൽ ബാങ്കിന്റെ പിഴവിലെ അടയ്ക്കൽ (NAST LOAN) പിഴവിലെ അടയ്ക്കൽ
പിഴവിലെ അടയ്ക്കൽ



1. പേര്

2. വയസ്സ്

3. താമസസ്ഥലം / വിലാസം

4. തൊഴിലടങ്ങൽ

5. തൊഴിലടങ്ങൽ

6. തൊഴിലടങ്ങൽ

7. തൊഴിലടങ്ങൽ

8. തൊഴിലടങ്ങൽ

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9. a) തൊഴിലടങ്ങൽ

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b) തൊഴിലടങ്ങൽ

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15 A\`cmhlminiÄ ... hbÊv At]£l\pampÅ _Ôw

- 1.....
- 2.....
- 3.....
- 4.....
- 5.....
- 6.....

16 PmayjmcpsS hnhc\$Ä

(1) {}thi\ \¼Ä

t]cv

]nXmhnsâ t]cv

taÂhnemkw

{]hr¯n, Øm]\w

t^m¬ \¼Ä ... Land.....Mob.....

(2) {}thi\ \¼Ä

t]cv

]nXmhnsâ t]cv

taÂhnemkw

{]hr¯n, Øm]\w

t^m¬ \¼Ä ... Land.....Mob.....

taÂ {}kvXmhn¨ kwKXniÄ kXyamsW¶pw ISw A\phZnjp¶]£w _m]nsâ kle N«\$fpw
_m[lambncnipsa¶pw R\$Ä CXn\mÂ k½Xn¨cnjp¶p.

IÄPn]mcsâ t]cpw H,pw.....

PmayjmcpsS t]cpw H,p 1).....

2).....

Name of Director :

OFFICE USE ONLY

Loan Application No.....

Date.....

Member No.

Share

Amount

Rs.....

LIABILITY

Applicant as Surety
due.....

(1) L.No..... Rs..... Over

(2) L.No..... Rs.....

Do.....

Surety No. 1 as Borrower

L.No..... Rs.....

Do.....

as Surety

(1) L.No..... Rs.....

Do.....

(2) L.No..... Rs.....

Do.....

Surety No.2 as Borrower

L.No..... Rs.....

Do.....

as Surety

(1) L.No..... Rs.....

Do.....

(2) L.No..... Rs.....

Do.....

REMARKS OF OFFICE

Account History :

Office Recommendation :

Clerk
tary

Accountant

Secre-

Resolution No.....

Date.....

Rs.
Month

Sanctioned

Rejected

President

Loan Disbursed.....



REQUEST FOR ATM CARD

CUSTOMER ID																				
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Name of Account Holder																				
Display name on Card																				
Account No.																				
Account Type	SB Account Regular		Cash Credit Regular																	
	MSS S B Account		C C Allied Activity																	
	Current Account Regular		RMCC																	
	JLG Current Account		K C C																	
Address																				
Mother's maiden Name																				
Phone No.																				

Declaration

I hereby declare that I have read and understood the card usage policy of Thenhipalam Co-op. Rural Bank. Bank can take legal action against any illegal usage of this card from my side. The usage of this card will be according to the Bank's rules and regulations on time to time. Also bank is having right to deduct the expenses or charges from my account for the usage of this card, if any.

Date

Thanking you,

Thenhipalam

Name & Signature

For Office use only

A/C No.Card No.

Card number Allotted : Yes / No. Processed date on CIPS.....

A/C Checked and Approved

Authorized Signatory