

UJJWAL DEEP INDIA NIDHI LIMITED

CIN NO. U65999BR2021PLN052324

FIXED DEPOSIT ACCOUNT FORM

Customer Care: +91 18002124524, Email: - support@ujjwaldeepbanking.com BRANCH NAME & CODE FD NUMBER Affix PERSONAL DETAILS: (Please fill in BLOCK Letter) **Passport** Photo **NAME** here **ADDRESS** M M Gender PIN DOB F PHONE: (M) PAN NO AADHAR CARD NUMBER NOMINEE NAME: RELATION WITH NOMINEE: NOMINEE ID TYPE OF DEPOSIT: FIXED DEPOSIT 1 YEAR ___/ 3 YEARS ___/ 5 YEARS ___ / 7 YEARS AMOUNT OF DEPOSIT: PAYMENT MODE RUPEES ONLY. IN WORD: ONLY. DEPOSIT PERIOD: **YEARS** ADVISOR NAME: ADVISOR CODE: MOBILE NUMBER: **TERMS & CONDITIONS:** 1. FD Amount should be deposited at a time. 2. Maturity Period will be _____ Months. 3. At the Maturity time, original certificate must be submitted by the Depositor. 4. Nomination is mandatory for every Deposit Fund. 5. Deposit only accepted by CASH, ONLINE, NEFT / RTGS. Applicant Signature Official Signature (Parent/Guardian's Sign for below 18 years candidate) DATE: _____ **UJJWAL DEEP INDIA NIDHI LIMITED** ACKNOWLEDGMENT TO CUSTOMER DATE: _____ We acknowledge the receipt of Fixed deposit Application Form (Customer Name) M for Rs. On M For Period of Years Maturity amount will be Rupees