

## APPLICATION FORM ISSUE OF PERPETUAL NON- CUMULATIVE PREFERENCE SHARE (PNCPS) (SERIES I) OF RS.10/-EACH AT PAR UNDER TIER-I CAPITAL

Branch	Code Code	Date DDMMYYYY						
DNICDS NI	A sultant Toronto I sultant Toronto I sultant	. 1 1 . 12 . 1 1						
PNCPS No	Applicant Type: Individual Office	r than Individual						
Please fill in the form in 'BLOCK' letters.	of Domestical New Consulation Design	Cl{ ₹10 lt						
, , ,	. of respetual Non- Cumulative Freterence	e share of CTO each at par						
amounting to ₹								
Rs. (in words)								
Dividend rate maximum@ 10.25 % p.a. (N	on Cumulative)							
Name of the first Applicant								
Name of the first Applicant:	AE EIDST NIAAAE	AAIDDIE NIAAAE						
Mr./Ms./Mrs./M/s. SURNAM	ME FIRST NAME	MIDDLE NAME						
MOBILE	EAAAH							
TEL DATE OF	FAIN							
Name of the Second Applicant:								
Mr./Ms./Mrs./M/s. SURNAM	AF FIRST NAME	MIDDLE NAME						
Wii./Wis./Wis./Wiys.		WIDDLE TVAVIL						
MOBILE	FMAII							
DAIL O	DIKITI TAN							
Name of the Third Applicant:								
Mr./Ms./Mrs./M/s. SURNAM	AF FIRST NAME	MIDDLE NAME						
Trui, Trio,		7,110012177412						
MOBILE	EMAIL							
Dividend on PNCPS to be credited to accou	nt of first applicant with NKGSB BANK (M	Nention 15 Digit Account No.)						
SB/CA A/c.								
If account of first applicant is maintained w								
Bank & Branch Name								
Address								
	IFSC Code							
City	State	Pin						
* Account No								
		and neverthis NECS)						
*Account Type SB-10 CA-11 OD	(*Mandatory for divide	na payout via NECS)						
	DECLARATION							
By making this application, I/We acknowle	dge that I/We have read and understood	d the terms and conditions of the						
issue of Perpetual Non-Cumulative Preferen	ce Shares (Series I) of NKGSB Co-operativ	e Bank Ltd, as disclosed in the offer						
document received by me/us.								
Specimen Signature	Applicant Type: Individual Other than Individual  No. of Perpetual Non- Cumulative Preference Share of ₹10 each at par  (Non Cumulative)  NAME FIRST NAME MIDDLE NAME  EMAIL PAN  NAME FIRST NAME MIDDLE NAME  OF BIRTH PAN  NAME FIRST NAME MIDDLE NAME  EMAIL PAN  NAME FIRST NAME MIDDLE NAME  OF BIRTH PAN  NAME FIRST NAME MIDDLE NAME  OF BIRTH PAN  NAME FIRST NAME MIDDLE NAME  OF BIRTH PAN  NAME FIRST NAME MIDDLE NAME  NAME FIRST NAME MIDDLE NAME  OF BIRTH PAN  NAME FIRST NAME MIDDLE NAME  NAME FIRST NAME M							
First Applicant	Second Applicant	Third Applicant						
L.H. Thumb Impression of Mr./Ms./Mrs.								
		Thumb Impression attested by						



Please affix a photograph with Signature Across			Please a photo with Sign Acro	graph nature				Please a photo with Sig Acro	graph nature
Signature- 1st Applicant			Signature- 2n	d Applicant				Signature- 3	d Applican
INTRODUCER'S DETA	11.6		olgilaloro zii	- принан				olgilaloro ol	а тррпсан
Introducer's Name									
Branch	Type of	f Account		Account	No				
I know the applicant/s the applicant/s Date D M M Y	for the last	n	nonths/yeaı	rs. I confir	m the id	entity, occu	pation an	d address(	es) of
PAYMENT DETAILS							Intr	oducer's Si	gnature
₹ By Cheque No./DD/PC	) No		Dated ch	No	ame of A	ccount Hold	ler	M M Y	YYY
		FOR NKG	SB BANK E	RANCH	USE ON	LY			
Photographs has/have Photo ID Elect Applicant/s / introduce Copy of PAN submittee First Applicant Custom Second Applicant Custom Third Applicant Custom Purpose: Share Linkage	tion card er has/have d er ID omer ID	Passport signed in my p	presence	Any Oth	/es	No No Signature	e & Code N	No. of Branc	h Official
CUSTOMER PROFILE						_			
FIRST APPLICANT		CLIDALAAAF		FIDCT N	1444		AAIDE		
Mr./Ms./Mrs./M/s.		SURNAME		FIRST N	IA/VIE		MIDL	DLE NAME	
Address: Flat/House N		Blda/S	Society Nam	ie					
Road/Lane						Area			
City		Pin code				State			
OCCUPATION: Salarie	d Self E	mployed	Business	Frim/C	Company	/ Trust	Others		
Office Address:									
					Office Te	l. No.			
City		Pin code				State			
Shareholder of Bank	Yes	No ^	Λembership	No					
KYC Documents subm	tted: Addre	ess Proof	PAN Card	Any	other Id	lentity Proo	f (Specify)	)	
Date of Birth D D M	MYYY	Y Qualific	ation			PAN			



## **SECOND APPLICANT**

Mr./Ms./Mrs./M/s.	SURNAME	FIRST NAME	MIDDLE NAME
Address: Flat/House No.	Bldg/Society N	lame	
Road/Lane		A	ırea
City	Pin code		State
OCCUPATION: Salaried S	elf Employed Busines	s Frim/Company/	Trust Others
Office Address:			
		Office Tel.	No.
City	Pin code		State
Shareholder of Bank Yes	No Members	ship No	
KYC Documents submitted: A	ddress Proof PAN C	ard Any other Ide	entity Proof (Specify)
Date of Birth D D M M Y Y	Y Y Qualification		PAN
THIRD APPLICANT			
THIRD APPLICANT  Mr./Ms./Mrs./M/s.	SURNAME	FIRST NAME	MIDDLE NAME
	SURNAME	FIRST NAME	MIDDLE NAME
	SURNAME  Bldg/Society N		MIDDLE NAME
Mr./Ms./Mrs./M/s.		Name	MIDDLE NAME
Mr./Ms./Mrs./M/s.  Address: Flat/House No.		Name	
Mr./Ms./Mrs./M/s.  Address: Flat/House No.  Road/Lane  City	Bldg/Society N	lame A	State State
Mr./Ms./Mrs./M/s.  Address: Flat/House No.  Road/Lane  City	Bldg/Society N	lame A	State State
Mr./Ms./Mrs./M/s.  Address: Flat/House No.  Road/Lane  City  OCCUPATION: Salaried  Selections of the selection of the selecti	Bldg/Society N	lame A	State Trust Others
Mr./Ms./Mrs./M/s.  Address: Flat/House No.  Road/Lane  City  OCCUPATION: Salaried  Selections of the selection of the selecti	Bldg/Society N	Name A	State Trust Others
Mr./Ms./Mrs./M/s.  Address: Flat/House No.  Road/Lane  City  OCCUPATION: Salaried  Office Address:	Bldg/Society N Pin code Busines	Same A  S Frim/Company/  Office Tel.	State Trust Others No.
Mr./Ms./Mrs./M/s.  Address: Flat/House No.  Road/Lane  City  OCCUPATION: Salaried  Solution  City  City	Pin code Busines Pin code No Members	Ship No	State Trust Others No.



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