APPLICATION FOR OPENING LOCKER DEPOSIT ACCOUNT SINGLE OR JOINT

Branch:	Date :-			
	wish to open Locker Deposit Account with your Bank at			
I/we have read and understand t in the Agreement for letting locke terms and conditions and in parti account(s). The Details of us are a	er provided by the Ba cular by the Bank's ru	nk. I/we herby agree t	o abide by the said	
Name	Address	Mobile No	Mail ID	
1				
2				
3				
4				
Address :				
Telephone Nos. Office		Residence		
NAME(S) OF A/C HOLDER(S)	DATE	SIGNA	ATURE	
LOCKER OPERATION :				
1)	The Locker account shall be operated:-			
a) () b) ()	Singly Jointly			
c) ()	By Either or Survivor/Former or Survivor/Latter or Survivor			
d) O	Any Other			
(Delete whichever is not app	olicable)		,	
Locker operator will be information	rmed in writing to Bank	Any Change in name of	locker holder/	
Introduced by				
(Name of the introducer)				
I hold current/saving /loan a			nch	
Signature				
Date				

NOMINATION DETAILS - MANDATORY IN CASE OF SINGLE HIRER

Yes I/We wish to nominate
(As per details below)

2. No, I/We declare that I/We do not wish to make a nomination for the Locker facility

Nomination under section 45 ZE of the Banking Regulation Act, 1949, and the Rule 4(1)/Rule 4(2) of the Banking Companies (Nomination) Rules, 1985, by Sole Hirer/joint Hirers in respect of Safety Lockers.

SOLE HIRER:

I nominate the following person to whom in the event of my death PPCB Bank Ltd. branch may give access to the locker and liberty to remove the contents of the locker subject to payment of locker rent.

JOINT HIRERS

We nominate the following person to whom in the event of death of one or more of us PPCB Bank Ltd. branch may give access to the Locker and liberty to remove the contents of the locker, jointly with the survivor or survivors of us, subject to payment of locker rent.

PERSONAL DETAILS OF NOMINEE	
Name	
Address 1	
Address 2	
District Cit	ty Pin code
State Co	ountry
Email ID	
Mobile No + 91 DOB	(IF MINOR) Age
Aadhar NoPAN	
Relationship with the Hirer, if any	
As the Nominee is a minor on this date, I appo	oint
Name	
Address 1	
Address 2	
District Cit	ty Pin code
State Co	ountry
Email ID	
Mobile No + 91 DOB	(IF MINOR) Age
Aadhar NoPAN	
Relationship with the Hirer, if any	
To receive the contents of the locker on th	e behalf of the nominee in the event of my death
during the minority of the nominee, subject to	o payment of locker rent.
Personal Details of the Witness (Thumb impre	ession shall attested by 2 Witnesses)
Witness 1 Name	Witness 2 Name
Address	Address
Signature	Signature
Place Date	
Leave this out if nominee is not minor	

Signature /Thumb impression of Hirer