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श्री सिद्धि गणेश

बचत तथा ऋण सहकारी संस्था लि.
SHREE SIDDHI GANESH SAVING & CREDIT CO-OPERATIVE LTD.
Gorkha Municipality-6, Haramtari, Gorkha, Phone 064-421555, 421556
website: www.siddiganesh.com.np e-mail: siddiganeshgrk@gmail.com

Account Opening Form

-vftf vfflg]kmf/fd_

The Manager
Shree Siddhi Ganesh Saving & Credit Co-operative Ltd.
Haramtari, Gorkha, Nepal
I/We request you to open account as per details given below.

Date-/ldlt_ M =====

Photo

1. Name of Depositer:
-vftfjfnfs]gfd_
2. Name of Father:
-lktfs]gfd_
3. Name of Husband/Grandfather:
-klt-afh]gfd_
4. Name of guardian (in Case of Minor):
-gfafns ePdf cleefj ssi]gfd_
5. Permanent Address:
-:yfol 7lf]gfd_
6. Temporary Address:
-c:yfol 7lf]gfd_
7. Phone No.: (a) Res: (b) Office: (c) Mobile No.:
-:Dks{kmg] g+ -3/_ -clkm;_ -dfjfof] g+
8. Birth Date: 9. Marital Status: Married: Unmarried:
-hGd ldlt_ -j}flxs l:ylt_ -lj]flxt_ -clj]flxt_
10. Occupation:
-kz]f_
11. Identity Card: Citizenship No.: Driving Licence No.: Other ID:
-kl/ro kq_ -gful/stf g+ -rfns cgdlt kq g+ -cGo kl/ro kq g+
12. Date of Issue: 13. Membership Fee:
-kl/ro kq hf/L ldlt_ -; b:otf z]ns_

Type of Account

-vftfs]lsl; d_

- | | |
|--|---|
| <input type="checkbox"/> Normal Saving A/C
-:fwf/Of art vftf_ | <input type="checkbox"/> Jestha Nagarik Saving A/C
-h]7 gful/s art vftf_ |
| <input type="checkbox"/> Special Saving A/C
-laifz art vftf_ | <input type="checkbox"/> Naari Saving A/C
-gf/L art vftf_ |
| <input type="checkbox"/> Daily Saving A/C
-b]gs art vftf_ | <input type="checkbox"/> Child Saving A/C
-afn art vftf_ |
| <input type="checkbox"/> Fixed Deposit A/C
-d4lt vftf_ | |
| <input type="checkbox"/> 1 Year FD
-! aif]d4lt_ | <input type="checkbox"/> 2 Years FD
-@ aif]d4lt_ |
| | <input type="checkbox"/> 3 Years FD
-# aif]d4lt_ |

14. Nominee's Name & Address:
-OR5fPsf]JolQmsf]gfd / 7lf]gfd_
- Relation: Contact No. :
-; DaGw_ ; Dks{g+m
15. Operatoin of our account shall be specified in specimen signature card attached herewith:
-vftf ; #fng ug{clVtfof/ ul/Psf]x: tflf/sf]gddf o; lg]bg ; fy ; #lg ul/Psf]5 _
16. I/We have agreed to abide the term and conditions governing the deposit and declare that is stated in the application is true and correct. -d-xfdl ; #yfsf]gl]lt, lgod kfnf ug{d# / ub5fub5f; ; fy}o; kmf/fddf lb0Psf] ; a}lj] / 0fx? ; To / ; fff]ePsf]sah u5f u5f; _
- Name of Mrkt Rep:

.....
Applicant's Signature
-lg]b]ssf]b: tvt_



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-b: tvt gdgf sf8{ SIGNATURE SPECIMEN CARD

Date:

vftfj fnfsfjgfd Full Title of Account		<input type="checkbox"/> Psn Single <input type="checkbox"/> sg}b0{Any Two <input type="checkbox"/> c6o Other		vftf : #fng Account Operation <input type="checkbox"/> Psn <input type="checkbox"/> d2tl <input type="checkbox"/> c6o	
vftf g= Account No. : <input type="text"/>		s{of ; lx sf}fleg sfnfjdl; n]dfq ug{xrf . Please keep signature within boxes and use BLACK ink only.			
gfd Name: ; xl / Signature		krf}f} 5fk Photo/Stamp		gfd Name: ; xl / Signature	
gfd Name: ; xl / Signature		krf}f} 5fk Photo/Stamp		gfd Name: ; xl / Signature	
lj z}f lgb}g Special Instruction					

OFFICE USE ONLY -sfof}o k}f}hgsf]nful dfq_

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Prepared by

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Entered by

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Checked by

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Approved by