



APPLICATION FORM ISSUE OF PERPETUAL NON-CUMULATIVE PREFERENCE SHARE (PNCPS) (SERIES I) OF RS 100/- EACH AT PAR UNDER TIER-I CAPITAL

Branch Name : Code : Date :

PNCPS No. : Applicant Type : Individual ☐ Other than Individual ☐

Please fill in the form in 'BLOCK' letters.

I/We here by apply for No. of Perpetual Non-Cumulative Preference Share of 100 each at
par amounting to

Rs. (in words)

FIRST APPLICANT

Mr./Ms./Mrs./M/s. SURNAME FIRST NAME MIDDLE NAME

Address

Landmark Area

City Pin Code State

OCCUPATION : Salaried ☐ Self Employed ☐ Business ☐ Firm/Company/Trust ☐ Others

Shareholder of Bank Yes ☐ No ☐ If Yes Membership No.

KYC Documents submitted : Address Proof ☐ PAN Card ☐ Any other Identity Proof (Specify)

DOB/DOI Qualification PAN

Paste your latest
passport size
photograph
here

Do not sign across
the photograph

SECOND APPLICANT

Mr./Ms./Mrs./M/s. SURNAME FIRST NAME MIDDLE NAME

Address

Landmark Area

City Pin Code State

OCCUPATION : Salaried ☐ Self Employed ☐ Business ☐ Firm/Company/Trust ☐ Others

Shareholder of Bank Yes ☐ No ☐ If Yes Membership No.

KYC Documents submitted : Address Proof ☐ PAN Card ☐ Any other Identity Proof (Specify)

DOB/DOI Qualification PAN

Paste your latest
passport size
photograph
here

Do not sign across
the photograph

THIRD APPLICANT

Mr./Ms./Mrs./M/s. SURNAME FIRST NAME MIDDLE NAME

Address

Landmark Area

City Pin Code State

OCCUPATION : Salaried ☐ Self Employed ☐ Business ☐ Firm/Company/Trust ☐ Others

Shareholder of Bank Yes ☐ No ☐ If Yes Membership No.

KYC Documents submitted : Address Proof ☐ PAN Card ☐ Any other Identity Proof (Specify)

DOB/DOI Qualification PAN

Paste your latest
passport size
photograph
here

Do not sign across
the photograph

NOMINATION FORM

I/We SURNAME FIRST NAME MIDDLE NAME

1. Mr./Ms./Mrs./M/s.

2. Mr./Ms./Mrs./M/s.

3. Mr./Ms./Mrs./M/s.

Nominate the following person to whom in the event of my/our death, PNCPS certificate, particulars of which are as given below, may be transmitted by The Banaskantha Mercantile Co-Operative Bank Ltd.

PNCPS Certificate No.	Name & Address of Nominee	Relationship with the PNCPS holder, if any	Age	If nominee is minor his/her Date of Birth	Customer ID

As the nominee is a minor on this date, I/We appoint Mr./Ms./Mrs./M/s.

Mobile

Age Address

City State PIN

On behalf of the nominee in the event of my / our death in whose favour the transmission of PNCPS Certificate may be effected by The Banaskantha MercantileCo-Operative Bank Ltd., during the minority of the nominee.

(1) (2) (3)

(Signature/s, Thumb Impression/s of PNCPS Holders)

WITNESS (ES)

SURNAME

FIRST NAME

MIDDLE NAME

Mr./Ms./Mrs./M/s.

Address

City

State

PIN

1) Signature

Signature & Code no of Branch Official

SURNAME

FIRST NAME

MIDDLE NAME

Mr./Ms./Mrs./M/s.

Address

City

State

PIN

2) Signature

Signature & Code no of Branch Official

PAYMENT DETAILS

₹

₹ in words

By Cheque No./DD/PO No.

Dated

Name of Account Holder

Drawn on Bank

Branch

Date of Realization

DIVIDEND PAY-OUT DETAILS

Dividend on PNCPS to be credited to account of first applicant with The Banaskantha Mercantile Co-Operative Bank Ltd. (Mention 14 Digit Account No.)

SB/CA A/c.

Branch

Code

DECLARATION

By Making this application, I/We acknowledge that I/We have read and understood the terms and conditions of the issue of Perpetual Non-Cumulative Preference Shares (Series 1) of The Banaskantha Mercantile Co-Operative Bank Ltd. as disclosed in the offer document received by me/us.

Specimen Signature
First Applicant

Specimen Signature
Second Applicant

Specimen Signature
Third Applicant

L.H. Thumb Impression of Mr./Ms./Mrs. _____

Thumb Impression attested by _____

FOR THE BANASKANTHA MERCANTILE CO-OPRATIVE BANK LTD. BRANCH USE ONLY (All Fields are Mandatory)

Address of the applicants has been confirmed on the basis of _____

Photographs has/have been affixed and signed in my presence Yes ☐ No ☐

Photo ID ☐ Election card ☐ Passport ☐ Any Other

Applicants introducer has/have signed in my presence Yes ☐ No ☐

Copy of PAN submitted Yes ☐ No ☐

First Applicant Customer ID

Second Applicant Customer ID

Third Applicant Customer ID

Purpose : Share Linkage ☐ Investment ☐ Allotment Date

Signature & Code No. of Branch Official

ACKNOWLEDGEMENT

Received from Mr./Ms./Mrs./M/s. _____

Rs. _____ (Rs. in words) _____

towards subscription of _____ No. of PNCPS of Rs. 100 each by cheque / DD / P.O. No. _____

Drawn on _____ (Subject to realization) _____

Date : _____

Signature of Bank Official