

DEMAND DRAFT APPLICATION FORM

Date DDMMYYYY BRANCH:		
DO/PO/FOR RS		
PAYABLE AT		
FAVOURING		
APPLICANT'S NAME		
CHEQUE NO DATE:		
CUSTOMER ACCOUNT NO.		
CASH Rs.		
BANK SEAL		
CUSTOMER COPY		

Date DDMMYYYY BRANCH:	DEMAND DRAFT APPLICATION FORM	EQUILES 5 Equitas 5 mall Finance Bank
PLEASE ISSUE DEMAND DR.	AFT PAYABLE AT LOCATION	
FAVOURING		
FOR RS. — &	CHARGES* OF RS. — & TOTAL AMOUNT	CHARGES*) Rs
RUPEES (in words)		ONLY
1	NOFAVOURING YOURSELVES FOR D	
B) I/WE AUTHORIZE YOU TO	DEBIT MY/OUR ACCOUNT NO.**	
C) PLEASE DEBIT CHARGES	MY / OUR ACCOUNT (APPLICABLE IF CHEQUE AMOU	INT DOES NOT INCLUDE CHARGES)
D) CASH ⁺ (DENOMINATION D	ETAILS OVERLEAF)	
AMOUNT IN WORDS RS.		
APPLICANT'S NAME	SIGNATURE	PHONE / MOBILE NUMBER
Please Note : Funds against can	cellation of draft / pay order will be credited to respective accour	nt or through pay order in case of cash

Denomination	Rupees	
1000x		
500x		
100×		
50x		
20x		
10x		
Others		
Total Rupees		

I/Ma asknowledge receipt of DD No	for Do	
I/We acknowledge receipt of DD No	for Rs	Signature