

འབྲུག་གི་དངུལ་ཁང་།

B.B. 213C



BANK OF BHUTAN

A dhi Company

Date:

D	D	M	M	Y	Y	Y	Y
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## ACCOUNT OPENING FORM (Recurring Deposit)

Please fill form in CAPITAL LETTERS only. All fields marked \* are MANDATORY

Please Tick the appropriate Product

### \*This section to be filled by the customer

Name

Existing BoB  
Account No.

I/We would like to avail the following products from your Bank:

### \*RECURRING DEPOSIT (RD)

- |  |   |
|--|---|
| <input type="radio"/> i. Simple Recurring Deposit for Public | <input type="radio"/> iv. Recurring Deposit Plus for Staff  |
| <input type="radio"/> ii. Simple Recurring Deposit for Staff | <input type="radio"/> v. Flexi Recurring Deposit for Public |
| <input type="radio"/> iii. Recurring Deposit Plus for Public | <input type="radio"/> vi. Flexi Recurring Deposit for Staff |

Installment Amount Nu.

No. of Year(s)

### Mode of Operation

- ☐ Single
 ☐ Jointly
 ☐ Either OR Survivor
 ☐ Anyone OR Survivor

### For Jointly/Either OR Survivor/Anyone OR Survivor

1 <sup>st</sup> Applicant Name: .....	A/c No:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
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### This section to be filled by Bank official

CIF No.

Account No.

Maturity Date

D	D	M	M	Y	Y	Y	Y
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Maturity Amount

Interest Rate

འབྲུག་གི་དངུལ་ཁང་།

B.B. 213C



**BANK OF BHUTAN**

A  Company

## TERMS & CONDITIONS

### Consent and Declaration:

- I/We agree to abide by the Bank of Bhutan's rules and regulations in force from time to time.
- In case of any incorrect credit to my/our account, I/We agree to repay the amount to the rightful owner or the Bank promptly.
- The Bank reserves the right to place a lien on my/our account for any of the following:
  - Outstanding cheque/debit authority payments;
  - Recovery of non-performing assets or overdrawn accounts;
  - Disputed transactions;
  - Properties for seizure under court orders.

### Prohibition of Third-Party Account Usage:

- I/We agree to use my/our account solely for lawful purposes and will not rent, share, or allow third parties to use my/our account.
- I/We acknowledge full responsibility for any unlawful use, including receiving, transferring, or holding illicit funds.
- I/We understand that permitting third-party account usage may result in immediate deactivation, and any illicit funds will be confiscated in accordance with applicable laws.
- I/We further acknowledge that breaching these terms could lead to criminal prosecution or civil penalties as stipulated by law.

## Signature/Thumb Impression of Applicant

ACCOUNT SIGNATORY 1

ACCOUNT SIGNATORY 2

ACCOUNT SIGNATORY 3

ACCOUNT SIGNATORY 4

## FOR BANK USE ONLY

Created By:

Authorized By:

(Signature)

Employee ID: .....

Date: .....

(Signature)

Employee ID: .....

Date: .....