

# KERALA TRANSPORT DEVELOPMENT FINANCE CORPORATION LIMITED

(Fully owned by Government of Kerala)

Registered Office: Level 8 (6th Floor), Trans Towers, Vazhuthacaud, Thiruvananthapuram-14 Phone : 0471-232 6883, 232 7881, 232 7882, 233 9198  
Fax : 0471- 232 6884 Email : ktdfc@vsnl.com Visit us at : www.ktdfc.com

Branch Offices: Level 2 (Ground Floor), Trans Towers, Vazhuthacaud, Thiruvananthapuram - 14, Phone : 0471-233 1904.

Planhottam Complex, (Upstairs of Indian Coffee House), Near KSRTC Bus stand, Thiruvalla, Phone : 0469-262 2799.

OS-59, 4th Floor, GCDA Complex, Marine Drive, Ernakulam-31 Phone : 0484-235 5394.

First Floor, Suharsha Towers, Round North, Near Co-operative Hospital, Shornur Road, Thrissur-680 001, Phone : 0487-232 3388.

Kairali/Sree Theatre Annexe, Opposite KSRTC Bus Stand, Mavoor Road, Kozhikode-01 Phone : 0495-272 4750.

## APPLICATION FORM FOR FIXED DEPOSIT FRESH RENEWAL

Name & Address of First Applicant (in Block Letter) Mr./Mrs.										Age			
<input type="text"/>										<input type="text"/>			
<input type="text"/>										<input type="text"/>			
<input type="text"/>										<input type="text"/>			
Phone No.					<input type="text"/>					Pin Code		<input type="text"/>	
Second Applicant's Name Mr./Mrs.					<input type="text"/>					Age		<input type="text"/>	
Third Applicant's Name : Mr./Mrs.					<input type="text"/>					Age		<input type="text"/>	
Guardian's Name (in case of minor only) Mr./Mrs.										Date of Birth of Minor (Attach Proof)			
<input type="text"/>										<input type="text"/>			
Nominee's Name Mr./Mrs.					<input type="text"/>					Relationship.....			

TYPE OF DEPOSIT		PERIOD	
<input type="checkbox"/> Money Multiplier Scheme	<input type="checkbox"/> Periodic Interest Payment Scheme	<input type="checkbox"/> 12 Months	<input type="checkbox"/> 24 Months
Interest Payable		<input type="checkbox"/> 36 Months	<input type="checkbox"/> 48 Months
<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> 60 Months	

Amount of Deposit	<input type="text"/>
Rupees.....	
Paid By	<input type="checkbox"/> Cheque <input type="checkbox"/> Demand Draft <input type="checkbox"/> Cash
Cheque No./DD No.....	Date.....
Bank.....	Branch.....
If Renewal FDR No.	<input type="text"/>
Additional Amount Rs.	<input type="text"/>
Cash / Cheque / DD No.....	Date.....
Crossed A/c Payee Cheque/DD should be payable to "KTDFC or Kerala Transport Development Finance Corporation Ltd."	

Tax to be Deducted: <input type="checkbox"/> Yes <input type="checkbox"/> No	PAN No.
Form Enclosed <input type="checkbox"/> 15G <input type="checkbox"/> 15H	<input type="text"/>
<input type="checkbox"/> 15A <input type="checkbox"/> Order	ITO

CATEGORY		OCCUPATION	
<input type="checkbox"/> Individual	<input type="checkbox"/> Firm	<input type="checkbox"/> Service	<input type="checkbox"/> Business
<input type="checkbox"/> Company	<input type="checkbox"/> Institutions	<input type="checkbox"/> House Wife	<input type="checkbox"/> Senior citizen
<input type="checkbox"/> Government	<input type="checkbox"/> HUF	<input type="checkbox"/> Others	
<input type="checkbox"/> Trust			

Delatils of Existing Deposits if Any : FDR No.....
FDR Sent Through: <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Regd. Post <input type="checkbox"/> Agent

Name of your Bank.....
Branch..... Account No.....
Proof of Identification or Introduction (For Fresh Deposit Only)
Introducer's Name.....
FDR No..... Signature.....
In the absence of Introducer, Photocopy of Election ID Card
<input type="checkbox"/> Passport <input type="checkbox"/> PAN Card <input type="checkbox"/> Driving Licence <input type="checkbox"/> Ration Card
<input type="checkbox"/> Documents evidencing Creation / Registration of the Trust

**DECLARATION :** I/We hereby deposit the amount as Fixed Deposit as per particulars given above. I/We hereby declare that the amount being deposited herewith is not out of any funds acquired by me/us by borrowing or accepting from any other persons. I/We declare that the first named applicant is the beneficial owner of this joint deposit and is to be treated as the payee for the purpose of deduction of tax under section 194A of the Income Tax Act, 1961. I/We have read the Terms and Conditions of Deposits and agree to abide by the same. "I/We have gone through the financials and other statements/particulars/representations furnished/made by the Company and after careful consideration. I am/We are making the deposit with the Company at my/our own risk and volition".

Signature of : .....  
First Applicant (Guardian in case of Minor) Second Applicant Third Applicant

Place : ..... Date: .....

FOR OFFICE USE ONLY				Receipt No.	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of Receipt	Amount	Cash / Cheque / DD	Old FDR No.	Date of Realization	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Bank	Bank Code
Date of Renewal	Date of Maturity	FDR No.	FD Section	Cashier / Manager	<input type="text"/>