

< Name of the bank >  
< Name of the branch >

**Application Number**

--

**APPLICATION FORM For Floating Rate Savings Bonds, 2020 (Taxable)**

**Information regarding Floating Rate Savings Bonds, 2020 (Taxable)-**

- (i) The interest on the bonds is payable semi-annually with resetting of coupon rate every 01 January and 01 July.
- (ii) The bonds will be issued subject to the terms and conditions laid down in Government of India Notification No.F.No.4(10)- B(W&M)/ 2020 dated June 26, 2020.

**Instructions regarding filling up of the form-**

- (i) Please fill the application form in all respects. Incomplete form is liable to be rejected.
- (ii) In fields with \*mark, strike out whichever is not applicable.
- (iii) It is strongly recommended that the Nomination Form may also be filled in along with the Application Form, in order to avoid inconvenience later.

**Applicant(s) Details [in block letters]**

<b>1<sup>st</sup> Applicant / Sole Applicant Details</b>	
Name in full	
Gender *	MALE / FEMALE
Date of Birth: (DDMMYYYY)	
PAN Number	
Mother's maiden name	
Communication Address	
Telephones (Mobile/Residence)	
Email Address	

<b>2<sup>nd</sup> Applicant Details</b>	
Name in full	
Gender *	MALE / FEMALE
Date of Birth: (DDMMYYYY)	
PAN Number	

<b>3<sup>rd</sup> Applicant Details</b>	
Name in full	
Gender *	MALE / FEMALE
Date of Birth: (DDMMYYYY)	
PAN Number	

Guardian Details (To be filled in case of minor)	
Name in full	
Gender *	MALE / FEMALE
Relationship with Minor *	FATHER / MOTHER / LEGAL GUARDIAN
Date of Birth: (DDMMYYYY)	
Communication Address	
Telephones (Mobile/Residence)	
Email Address	

Other Details	
Applicant Status *	RESIDENT INDIVIDUAL / HUF / ON BEHALF OF MINOR / POWER OF ATTORNEY HOLDER
Investment Details *	CREDIT TO EXISTING BLA No. _____ / OPEN A NEW BLA @ @- applicable only for first time investor
Mode of Holding *	SINGLE / JOINT / ANYONE OR SURVIVOR / LEGAL GUARDIAN
Mode of Investment *	CASH (up to Rs.20,000/- only) / CHEQUE / DEMAND DRAFT / ELECTRONIC CREDIT
FOR CHEQUE / DD	Number _____ Dated _____ Drawn on Bank/branch _____
Investment Amount	(In figures) Rs. _____ (In words) Rupees _____

BANK PARTICULARS of the 1 <sup>st</sup> Applicant FOR PAYMENT OF INTEREST / REDEMPTION AMOUNT	
Account Holder Name	
Bank Name	
Branch Name / Address	
MICR Code of the Bank & Branch	
Account No.	
IFSC Code	
Account Type*	SB / Current
(Please attach a photocopy of the Cheque leaf or a cancelled cheque issued to you by the bank for verification of the Code number)	

**Nominee details-** Nomination Form (as applicable) may be filled and submitted along with the application form.

**Declaration:** I/We hereby declare and undertake that (i) the information furnished in this application form is correct and complete. If the transaction is delayed at all for reasons of incomplete or incorrect information, I would not hold the user institution responsible. (ii) I have read and understood the details of information for the investors as well as rights and duties of investors (copy attached). The agent/bank has explained the features of the scheme. (iii) I hereby agree to discharge the responsibility expected of me as a participant under the scheme.

**Declaration regarding Income Tax exemption, if any** – (Please strike out if not applicable)

I have obtained Income Tax exemption from Income Tax Authorities under the provision \_\_\_\_\_ of the Income Tax Act, 1961 and am submitting a true copy of the certificate along with the application form.

Signature / Thumb Impression  
1<sup>st</sup> Applicant

Signature / Thumb Impression  
2<sup>nd</sup> Applicant

Signature / Thumb Impression  
3<sup>rd</sup> Applicant

Date - \_\_\_\_\_

Place - \_\_\_\_\_

Date, Bank Stamp & Signature of the  
authorized official of the Receiving Office

In case of thumb impression, attestation by two witnesses

1 <sup>st</sup> Witness		2 <sup>nd</sup> Witness	
Name		Name	
Address		Address	
Signature		Signature	

**H.U.F. declaration** (mandatory, if applicant is Karta of HUF)

I, \_\_\_\_\_, residing at the address given against First Applicant, do solemnly affirm that I am the Karta of the Hindu Undivided Family and as such have full powers to deal in the Floating Rate Savings Bonds 2020 (Taxable), standing in the name of the HUF.

Specimen signature for and on behalf of the HUF (name of the HUF) \_\_\_\_\_

Place \_\_\_\_\_

Date \_\_\_\_\_

(Signature of the Karta with seal of HUF)

**For Office use only**

Broker's name & Code	Sub Broker's name & Code	Bank branch stamp	Branch name & Code	BLA Number	Verified By
Date of receipt of Application (DD/MM/YYYY)	Date of realization of funds (DD/MM/YYYY)	Date of transfer to Link Cell (DD/MM/YYYY)	Full Address of the Branch		Any other information