



एस बी बी जे  
S B B J

# STATE BANK OF BIKANER & JAIPUR

APNO DESH - APNO BANK

## NRE / FCNR ACCOUNT OPENING FORM

Account / Customer No.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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I	Please open my NRI Account at your _____ (Name of Branch)				
	Customer Information _____ (Please fill customer information sheet attached)				
	Individual Details	First Name	Middle Name Surname		
	1st Applicant	Mr./Mrs./Ms.			
	2nd Applicant	Mr./Mrs./Ms.			
	3rd Applicant	Mr./Mrs./Ms.			
	1st Applicant	Date of Birth	SEX (10 digit) PAN/GIR No. (if an assessee)		
	2nd Applicant	Date of Birth	M/F _____		
	3rd Applicant	Date of Birth	M/F _____		
	ALL APPLICANTS SHOULD BE NRIs	Name of Parent/ Natural Guradian (in case any of the applicants is a minor)			
NAMES ADDRESS & TELEPHONE Nos. WITH CITY CODE	Overseas Address (Compulsory)		Indian Address <input type="checkbox"/>		
	Address _____		Address _____		
	_____		_____ Pin Code <input type="text"/>		
	Tel. Res. _____ Office _____		Tel. Res. _____ Office _____		
	Fax _____ Mobile _____		Fax _____ Mobile _____		
	E-mail ID _____		E-mail ID _____		
			Telephone No. Indian if any _____		
	( <input type="checkbox"/> : Please tick the address to which mails are to be sent)				
	II	ACCOUNT DETAILS	TYPES OF ACCOUNT TO BE OPENED	Amount (Specify Currency)	Period
				<input type="checkbox"/> 1. Non-Resident (External) Savings Bank / Current A/c	
<input type="checkbox"/> 2. Non-Resident (External) Reinvestment Plan Deposit A/c					
<input type="checkbox"/> 3. Non-Resident (External) Rupee Term Deposit A/c					
<input type="checkbox"/> 4. F.C.N.R. Reinvestment Plan Deposit A/c					
<input type="checkbox"/> 5. Foreign Currency (Non-Resident) Term Deposit A/c					
III	MODE OF OPERATION (TICK ONLY ONE)	<input type="checkbox"/> Single <input type="checkbox"/> Either or Survivor of us			
		<input type="checkbox"/> Both or Survivor of us <input type="checkbox"/> Later or Survivor of us			
		<input type="checkbox"/> Former or Survivor of us <input type="checkbox"/> Other (please specify)			
IV	DETAILS OF REMITTANCES	1. Cheque/Demand Draft No. _____ dt. _____ for _____ enclosed			
		2. Wire Transfer No. _____ dt. _____ Amount _____ sent			
		3. Name and Address of the Remitting Bank			

V PAYMENT / RENEWAL INSTRUCTIONS ( INTEREST / PRINCIPAL )	<input type="checkbox"/> Please transfer Interest to Savings / Current A/c. No. _____ <input type="checkbox"/> Renew Principal only. <input type="checkbox"/> Renew Principal Plus Interest. <input type="checkbox"/> Please keep Term Deposits in safe custody and renew for similar period on maturity.	<input type="checkbox"/> Do not renew <input type="checkbox"/> Mail transfer for maturity amt. in INR / USD / GBP Euro <input type="checkbox"/> Transfer to Saving / Current A/c. No. _____ <input type="checkbox"/> Any other instructions ( Please specify )																					
VI NOMINATIN	<input type="checkbox"/> Yes (Please attach separate Nomination Form) <input type="checkbox"/> No																						
VII OTHER FACILITIES  ATM-CUM-DEBIT CARD  INTERNET BANKING (INB)	I intend to avail the ticked ( ✓ ) products / services also (to be applied for separately by each applicant) ATM-cum-debit card <input type="checkbox"/> Internet Banking <input type="checkbox"/> The facility is available for mode of operation : Single / Either or Survivor only If you already have an SBBJ ATM-cum-Debit Card, issued by this branch, please give the card number to which the account that you how wish to open is to be linked. Card No. of 1st Applicant <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Card No. of 2nd Applicant <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Please tick below. In case you do not have an SBBJ ATM-cum-Debit Card and you would like to have ATM-cum-Debit Card Operating on : <input type="checkbox"/> NRO Savings A/c. <input type="checkbox"/> NRE Savings A/c. The Bank offers online banking to allow you another option to access your account. A PIN will be mailed to you to enable you to use online banking. (please fill in the online SBI registration form in the enclosure)																						
VIII  SPECIMEN SIGNATURE  PLEASE SIGN IN BLACK INK. PHOTOGRAPHS SHOULD BE SIGNED ACROSS BY THE APPLICANTS	<table border="1"> <thead> <tr> <th data-bbox="396 814 454 871"></th> <th data-bbox="454 814 831 871">Name</th> <th data-bbox="831 814 1068 871">Specimen Signature</th> <th data-bbox="1068 814 1380 871">For Verification by Branch Officials</th> </tr> </thead> <tbody> <tr> <td data-bbox="396 871 454 928">1</td> <td data-bbox="454 871 831 928"></td> <td data-bbox="831 871 1068 928"></td> <td data-bbox="1068 871 1380 928"></td> </tr> <tr> <td data-bbox="396 928 454 984">2</td> <td data-bbox="454 928 831 984"></td> <td data-bbox="831 928 1068 984"></td> <td data-bbox="1068 928 1380 984"></td> </tr> <tr> <td data-bbox="396 984 454 1041">3</td> <td data-bbox="454 984 831 1041"></td> <td data-bbox="831 984 1068 1041"></td> <td data-bbox="1068 984 1380 1041"></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th data-bbox="396 1041 779 1375">PHOTO</th> <th data-bbox="779 1041 1068 1375">PHOTO</th> <th data-bbox="1068 1041 1380 1375">PHOTO</th> </tr> </thead> <tbody> <tr> <td data-bbox="396 1041 779 1375"> <div style="border: 1px solid black; width: 100%; height: 100%;"></div> 1st Applicant </td> <td data-bbox="779 1041 1068 1375"> <div style="border: 1px solid black; width: 100%; height: 100%;"></div> 2nd Applicant </td> <td data-bbox="1068 1041 1380 1375"> <div style="border: 1px solid black; width: 100%; height: 100%;"></div> 3rd Applicant </td> </tr> </tbody> </table>		Name	Specimen Signature	For Verification by Branch Officials	1				2				3				PHOTO	PHOTO	PHOTO	<div style="border: 1px solid black; width: 100%; height: 100%;"></div> 1st Applicant	<div style="border: 1px solid black; width: 100%; height: 100%;"></div> 2nd Applicant	<div style="border: 1px solid black; width: 100%; height: 100%;"></div> 3rd Applicant
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IX VERIFICATION OF SIGNATURE  SIGNATURE NAME OF PERSON VERIFYING WITH RUBBER STAMP AND / OR SEAL & ADDRESS	1. Verification of signature to be made by <input type="checkbox"/> Indian Embassy <input type="checkbox"/> High Commissioner <input type="checkbox"/> Bank <input type="checkbox"/> Consulate <input type="checkbox"/> Notary Public <input type="checkbox"/> Person known to the Bank 2. Verification is not necessary if you have an account with this branch. (Please give the Account No.) _____ Above Signatures verified by (Name) _____ Designation _____ Signature _____ Place : _____ Date : _____																						

X Introduction Details (any one)

Self (in case of an existing customer of the Bank) A/c. No.

In case of attestation by self, please enclose (any 2 of the following)

1. Cheque drawn on bank a/c. abroad
2. Latest Overseas Bank statement in original.
3. Copy of Telephone/Electricity Bill
4. Cancelled paid cheque of your Overseas Bank a/c.
5. Drawing Income / Employee ID / Labour Card

XI  Copies of Passport & Residence Visa / ID Card duly attested by Banker / Notary Public / Indian Embassy / A person Known to the Bank / Self

Passport Details

Applicant's Name	Passport No.	Date & Place of Issue	Nationality	Present Occupation
1)				
2)				
3)				

Declarations :

I / We hereby declare that I am / we are non-resident Indian (s)/of Indian Origin. I / We understand that the above account will be opened on the basis of the statements / declarations made by me / us, and I / we also agree that if any of the statements / declarations made herein is found to be not correct in material particulars, you are not bound to pay any interest on the deposit made by me / us.

I / We agree that no claim will be made by me / us for any interest on the deposit/s for any period after the date/s of maturity of the deposit/s. I/We agree to abide by the provisions of the Foreign Currency (non-Resident) Account/Non-Resident (External) Account Scheme. I/We hereby undertake to intimate you about my/our return to India for permanent residence immediately on arrival.

I/We agree that if premature withdrawal is permitted at my/our request, the payment of interest on the deposit may be allowed in accordance with the prevailing stipulations, laid down by Reserve Bank of India in the regard.

I/We authorise the bank to asthmatically renew the deposition on the due date for an identical period unless the instruction to the contrary from me/us is received by the Bank before maturity, I/We understand that the renewal will be in accordance with the provisions of the Reserve Bank of India scheme inforce at the time or renewal.

I/We further understand that the interest applicable on renewals will be at the applicable ruling rates on the date of maturity and that the renewal will be noted on the deposit receipt on my/our presenting the same on the maturity date or later for renewal/payment.

( \_\_\_\_\_ )  
Signature of 1st Applicant

( \_\_\_\_\_ )  
Signature of 2nd Applicant

( \_\_\_\_\_ )  
Signature of 3rd Applicant

XII Format for Declaration Cum Undertaking of NRI

(Under Section 10 (5), Chapter III of Foreign Exchange Management Act, 1999)

I/We hereby declare that the transaction (s) the details of which are specifically mentioned in the Schedule hereunder does not involve and is not designed for the purpose of any contravention or evasion of the provisions of the aforesaid Act or of any rule, regulation notification, direction or order made thereunder. I/We also hereby agree and undertake to give such information/documents, before the Bank undertakes the transaction (s) and as may be required from time to time as will reasonably satisfy you about the transaction (s) in terms of the above declamation

I/We also understand that if I/We refuse to comply with any such requirement or make unsatisfactory compliance therewith, the Bank shall refuse in writing to undertake the transaction and shall if it has reason to believe that any contravention/evasion is contemplated by me/us report the matter to Reserve Bank of India.

\*I/We further declare that the undersigned has/have the authority to give this declaration and undertaking on behalf of the firm/company.

Place :  
Date :

Signature of the applicant  
For Foreign Exchange

\*Applicable when the declaration/undertaking is signed on behalf of the firm/company. Non-resident Indians (NRIs), persons of Indian Origin (PIOs) and residents of any jurisdiction where opening or maintaining the account is prohibited by the laws or regulatory requirements of such jurisdiction are not eligible to open and maintain this account.

**FOR OFFICE USE**

1. Applicant (s) interviewed and purpose ascertained (description) \_\_\_\_\_
2. Application received by Post \_\_\_\_\_
3. Particulars of identification \_\_\_\_\_ (xerox copies of the documents obtained)  
OPEN THE ACCOUNT  REJECT (GIVE REASONS)   
ACCOUNT No.
4. Account opened on (date) \_\_\_\_\_
5. Value Date \_\_\_\_\_ Signature of Branch Manager for Value Date \_\_\_\_\_
6. Account opened by computer operator (name) \_\_\_\_\_  
Authorised person/Officer (name) \_\_\_\_\_
7. Internet (INB)/Telebanking ID Despatched on \_\_\_\_\_
8. Customer particulars and signature loaded on site on \_\_\_\_\_
9. ATM/Debit Card No. \_\_\_\_\_ despatched on \_\_\_\_\_
10. INB services approved & INB customer flag set to "Y"
11. Letter of thanks sent to customer on \_\_\_\_\_
12. Acknowledgement received from customer on \_\_\_\_\_
13. Nomination form entered in register & its serial No. \_\_\_\_\_
14. TDR/STDR No. \_\_\_\_\_ dt. \_\_\_\_\_
15. Threshold Limit Rs. \_\_\_\_\_

Branch Manager/Authorised Official

Account transferred to \_\_\_\_\_ / Branch on \_\_\_\_\_

Account closed on \_\_\_\_\_

Signature of Officer

*Non-resident Indians (NRIs), persons of Indian origin (PIOs) and residents of any jurisdiction while opening or maintaining the account, is prohibited by the laws or regulatory requirements of such jurisdiction are not eligible to open and maintain this account.*

**INTERNET BANKING (INB)  
REGISTRATION FORM**

(to be signed and mailed to the branch where the account is maintained)

To

The Branch Manager, SBBJ

.....  
.....

I wish to register as a user of online internet Banking Facility.

Name of Customer (25 Characters)

--

Mailing Address : E-mail :

Telephone No. : 



 Mobile No. :

Date of Birth

DD	MM	YY

**Single/Joint\*  
Accounts      Transaction  
Rights  
(Y/N)**

**My Account Numbers**


\*Mode of operation of Internet Banking will be the same as that for your account at the branch (See Part III of the Account Opening Form)

I have read the provisions contained in the "Terms of service document" of "Internet Banking" and accept them. I agree that the transactions executed over Internet Banking under my Username and Password will be binding on me.

Customer's Signature Date :

Branch Use

Signature Verified

## TERMS OF SERVICE : INTERNET BANKING

### General Information :

1. You should register for Internet Banking with the branch where you maintain the account.
2. If you maintain accounts at more than one branch, you need to register at each branch separately.
3. Normally Internet Banking services will be open to the customer only after he acknowledges the receipt of password.
4. We Invite you to visit your account on the site frequently for transacting business or viewing account balances. If you believe that any information relating to your account has a discrepancy, please bring it to the notice of the branch by e-mail or letter.
5. In a joint account, all account holders are entitled to register, as users of Internet Banking, but transactions would be permitted based on the account operation rights recorded at the branch. (To begin with the services will be extended only to single or Joint "E or S" accounts only.)
6. All accounts at the branch whether or not listed in the registration form, will be available on the Internet Banking.

### Security :

1. The Branch where the customer maintains his account will assign :
  - a) User-id &
  - b) Password
2. The User-id and Password given by the branch must be replaced by User Name and Password of customer's choice at the time of first log-on. This is mandatory.
3. Bank will make reasonable use of available technology to ensure security and to prevent unauthorised access to any of these services. The Internet Banking service is VERISIGN certified which guarantees, that it is a secure site. It means that
  - You are dealing with SBBJ at that moment.
  - The two-way communication is secured with 128-bit SSL encryption technology, which ensures the confidentiality of the data during transmission.These together with access control methods designed on the site would afford a high level of security to the transactions you conduct.

### SBBJ will soon be implementing PKI/Digital Signature.

4. You are welcome to access Internet Banking from any where anytime. However, as a matter of precaution, customers may avoid using PCs with public access.
5. There is no way to retrieve a password from the system. Therefore if a customer forgets his password, he must approach the branch for re-registration.

### Bank's terms :

6. All requests received from customers are logged for backend fulfillment and are effective from the time they are recorded at the branch.
7. Rules and regulations applicable to normal banking transactions in India will be applicable mutatis mutandis for the transactions executed through this site.
8. The Internet Banking service cannot be claimed as a right. The bank may also convert this into a discretionary service anytime.
9. Dispute between the customer and the Bank in this service is subject to the jurisdiction of the courts in the Republic of India and governed by the laws prevailing in India.
10. The Bank reserves the right to modify the services offered or the terms of service of Internet Banking. The changes will be notified to the customers through a notification on the Site.

### Customer's obligations :

1. The customer has an obligation to maintain secrecy in regard to User name & Password registered with the Bank. The bank presupposes that login using valid User Name and Password is a valid session initiated by none other than the customer.
2. Transaction executed through a valid session will be construed by SBBJ have emanated from the registered customer and will be binding on him/her.
3. The customer will not attempt or permit others to attempt accessing the Internet Banking through any unlawful means.

### Dos' & Don'ts :

1. The customer should keep his/her ID and password strictly confidential and should not divulge the same to any other person. Any loss sustained by the customer due to non-compliance of this condition will be at his/her own risk and responsibility and the Bank will not be liable for the same in any manner.
2. The customer is free to choose a password of his own for Internet Banking services. As a precaution, a password that is generic in nature, guessable or inferable personal data such as name, address, telephone member, driving license, date of birth etc. is best avoided. Similarly it is a good practice to commit the password to memory rather than writing it down somewhere.
3. It may not be safe to leave the computer unattended during a valid session. This might give access to your account information to others.

## NOMINATION FORM DA 1

Nomination under Sec. 45ZA of the Banking Regulation Act, 1949 and Rule 2 (1) of the Banking Companies (Nomination) Rules, 1985 in respect of Bank deposits.

I/We \_\_\_\_\_

Name (s) & Address (es) of the Account Holder (s)

nominate the following person, to whom, in the event of my/our/minor's death, the amount of deposit in the account, (Particulars whereof are given below) may be returned by **State Bank of Bikaner & Jaipur**.

### DEPOSIT

Nature of Deposit	Distinguishing Number (Give Account Number)	Additional Details, if any

### NOMINEE

Name and Address (Only one nominee)	Relationship with depositor, if any	Age	If Nominee is a minor, give Date of Birth
Mr./Mrs./Ms.			

\*As the nominee is a minor on this date, I/we appoint mr./mrs./miss. \_\_\_\_\_

(Name, Address & of the guardian) to receive the amount of the deposit in the account on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Signature (Name & Address of witness)

Place :

Date :

\*Strike out if nominee is not a minor.

**\*Nomination without witness is not valid & cannot be registered.**

Signature (s) depositor (s)

Note : Where deposit is made in the name of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor.

### FOR BRANCH USE ONLY

Particulars of Form DA1 (if received) entered in Nomination Register Sr. No. \_\_\_\_\_ Dt. \_\_\_\_\_

Customer advised on \_\_\_\_\_

Acknowledgement received on \_\_\_\_\_

Open \_\_\_\_\_

Account opened \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / 20 \_\_\_\_

No. of Cheque Book/TDR issued \_\_\_\_\_

\_\_\_\_\_ (from)

\_\_\_\_\_ (to)

Branch Manager \_\_\_\_\_

Operator \_\_\_\_\_

Officer \_\_\_\_\_



# STATE BANK OF BIKANER & JAIPUR

## APNO DESH - APNO BANK

### Information Sheet

(Annexure of A/c. opening form to be obtained from each applicant separately)

A/c./Customer No.

Full Name Mr/Mrs/Miss \_\_\_\_\_

Father's/Husband's Name Mr. \_\_\_\_\_

(Please tick the Appropriate Box)

#### (A) Occupation :

1. Occupation :  Salaried  Self Employed/Professional  Business  
 Student  Others (specify .....)
2. If self-employed :  Doctor  Lawyer  Engineer  
 Business  Others
3. Source of Funds \_\_\_\_\_
4. I. Monthly Income (equivalent)  US \$ 1000  US \$ 1001 - US \$ 5000  
 US \$ 5001-10,000  US \$ 10,001 - US \$ 20,000  
 > US \$ 20,000
- II. Annual Turnover US \$ \_\_\_\_\_

#### (B) Personal :

5. Date of Birth : DD   MM   YY
6. Marital Status :  Married  Unmarried
7. Any relative settled abroad  Yes,  No. If yes, kindly give their names and addresses.
- Name \_\_\_\_\_ Address \_\_\_\_\_
- Name \_\_\_\_\_ Address \_\_\_\_\_
- Name \_\_\_\_\_ Address \_\_\_\_\_

- (C) (i) Dealing with other Banks  Yes  No

If Yes

8. Name of the Bank and Branch \_\_\_\_\_

9. Type of A/cs./Facilities \_\_\_\_\_

- (C) (ii) Dealing with our Bank/Branch  Yes  No

If Yes, name of branch \_\_\_\_\_

Type of a/c/Facilities \_\_\_\_\_

#### (D) Existing Credit facilities if any ;

- |                     |                              |                             |                      |                              |                             |
|---------------------|------------------------------|-----------------------------|----------------------|------------------------------|-----------------------------|
| 10. Car Loan        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | 14. Consumer Loan    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. Credit Cards    | <input type="checkbox"/> Yes | <input type="checkbox"/> No | 15. Business         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12. Housing Loan    | <input type="checkbox"/> Yes | <input type="checkbox"/> No | 16. Against Security | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13. Education Loans | <input type="checkbox"/> Yes | <input type="checkbox"/> No | 17. Others (Specify) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |





# STATE BANK OF BIKANER & JAIPUR

APNO DESH - APNO BANK

### Additional Information (Optional)

Please fill in the following information in order to help us identify your requirements for better service :

1. Educational Qualification  Non-Graduate  Graduate  Post Graduate  Professional (Pl.specify)
2. Your Spouse's  Non-Graduate  Graduate  Post Graduate Qualification
3. Family Member : 

	Upto 10 yrs	11-20	21-45	46-60	Above 61	Total
No. of Males	<input type="checkbox"/> +	<input type="checkbox"/> +	<input type="checkbox"/> +	<input type="checkbox"/> +	<input type="checkbox"/> =	<input type="checkbox"/>
No. of Females	<input type="checkbox"/> +	<input type="checkbox"/> +	<input type="checkbox"/> +	<input type="checkbox"/> +	<input type="checkbox"/> =	<input type="checkbox"/>
4. How may times you have been to India in last 3 years  Never  1-5 times  above 5 times
5. Do you have a Credit Card  Yes  No  SBI Card  Non SBI Card

- | Assets                          | Total   | US\$ | (Approx)  |
|---------------------------------|---|------|---|
| 6. Vehicles                     | <input type="checkbox"/> Car                  |      | <input type="checkbox"/> Others <input type="checkbox"/> None             |
| 7. House you live in            | <input type="checkbox"/> Own                  |      | <input type="checkbox"/> Rented <input type="checkbox"/> Employer's       |
| 8. Life Policy for (equivalent) | <input type="checkbox"/> <US \$ 2000          |      | <input type="checkbox"/> <US \$ 5000 <input type="checkbox"/> >US \$ 5000 |
| 9. Other Investments            | <input type="checkbox"/> <US \$ 2000          |      | <input type="checkbox"/> <US \$ 5000                                      |
|                                 | <input type="checkbox"/> >US \$ 5000 < 10,000 |      | <input type="checkbox"/> <US \$ 10,000 - US \$ 50,000                     |
|                                 | <input type="checkbox"/> <US \$ 5000          |      | <input type="checkbox"/>  |

10. Any other assets (please specify) \_\_\_\_\_

Place : \_\_\_\_\_

Signature of Customer \_\_\_\_\_

Date : \_\_\_\_\_