

ACCOUNT OPENING FORM & AUTHORITY FOR TRUST ACCOUNT.

| Druk | ranch Incumbent, PNB Bank Ltd, | Date | 20 | | |
|------------------------------------|--|--|--|--|--|
| Dear S | ir, | | | | |
| upon t | open a Current Account in your E | Trust. o', or as the case may be w or resolution No. | The Account will be operated who has/have been authorized by | | |
| future, resolut | y of the Trust-Deed dated if any change is required in the cion of the Board of Trustees and you will allow such persons to operate | name of operators of the you will be informed accordingly. | account. It will be effect by the | | |
| _ | ree to comply with and be bound et of such accounts. | l by Bank's rules now and | from time to time force for the | | |
| 1. | "I/We am/are not enjoying any credit facility with any other Bank or any other Branch of your Bank and I/We undertake to inform you in writing, as soon as any credit facility is availed of by me/us from any other branch of your Bank". | | | | |
| 2. | "I/We am/are enjoying credit facilities with other Bank(s)/other branch(es) of your Bank as per details given in the enclosed sheet". | | | | |
| | (Inapplicable clause may be deleted) | | | | |
| Please | supply us with the Cheque Book | and the Pass Book. | Yours faithfully, | | |
| Address | | | | | |
| pation 8 | | | | | |
| ul, occu | | | | | |
| Name in full, occupation & Address | | | | | |

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| SPECIMEN SIGNATU | TRES: | | | | | |
|---|-------------------|---------------|---------------|--|--|--|
| | | ••••• | | | | |
| | | | | | | |
| | | | | | | |
| Introduced by: A/c No, if any with DPNB | | | | | | |
| years | months. I confirm | his/her ident | ity and that | he/she is engaged in theand is residing at the | | |
| Signature: Address: | | OFFICE US | L | | | |
| | FOR | OFFICE US | <u>r</u> | | | |
| A/c No | | A | /c created by | 7 | | |
| Pass Book Issued | | | Accor | unt opened and signature attested by me. | | |
| Cheque Book Issued | | | | attested by me. | | |
| C.R Obtained | | | | | | |
| Initial Deposit | Nu. | | | | | |
| Standing Inst. Note | | | | Authorized Officer | | |

(Alterations must be initialed by all the signatories).

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