

Branch Manager  
Eastern Bank PLC. \_\_\_\_\_ Branch

Date \_\_\_\_\_

**Subject: Application for Purchase of Sanchaypatra/ FCY Bond**

I/We, the undersigned, below mentioned account holder(s) of your Bank do hereby delegate the authority to Eastern Bank PLC. to debit my/our following Bank account maintained with you.

Account No. 

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Account Title..... Routing No.:.....

Proof of Submission of Tax Return (if applicable):                      Mobile:.....

e-TIN no..... Assessment Year (Document Attached).....

Please arrange to debit Tk. .... [In Words:].....

.....Only) and issue the following instrument (tick as appropriate):

- Sanchaypatra (BSP / Three Monthly Profit Based / Paribar / Pensioner) as per attached application.
- FCY Bond (WEDB / DIB / DPB) as per attached application.

\_\_\_\_\_  
Customer's Signature

\_\_\_\_\_  
Signature of Joint Signatory

\_\_\_\_\_  
S.V. (full signature with ID)

**FOR BANK'S INTERNAL USE ONLY****Branch Recommendation :**

\_\_\_\_\_  
Signature & Seal of BM/BSSM/BOM

**Issuing Record:**

Registration No. :.....

Date: .....

.....  
Maker

.....  
Checker

