

Approved by:-Ministry of Corporate Affairs Govt of India

Reg Office:- 1 Anand Nagar Katara Basti (U.P.) 272001

APPLICATION FOR REFUND OF DEPOSIT

Dear Sir/Madam	
I/we do hereby apply for Refund of Deposit of R.D. Plan NVA Nidhi ltdAmt.	
Rsagainst my DRD No	
Date	
Applicant's Full Name	
Father's/Husband's Name	
Address	
Pan Card No. (if any no Pan, please attach form 60)	
Bank account No. (with Bank/Branch Name)	
please arrange to make Refond of deposit from asforsaid DRD as per company rules. I fuether give my consent for conversation consent for consersion in different plan as advised by agent/Introducer. I am fully apprised of and agree with all the term and condition m	nent
oned in the application from conveyed through circulars of the company.	
Thanking You	
Witness Applicant	
Full Signature	
Name	
Code	
Witness of Worker Signature of Applicant	
FOR AUTHORISED CENTER USE ONLY	
Authorised Center NameCodeCode	ا ا ا
DRDAdjustment Amt.(if any) Rs	
Full Sign	
Name	
Emp. Code	
(Signature Varified by)	

Note: It is necessary that all entries of this application from should be checked & varified by the authorised person of maan abhiman nidhi ltd.