सालपा विकास बैंक लि.
SALAPA BIKAS BANK LTD.

ACCOUNT ACTIVATION REQUEST FORM

Date: _____

To,
Salapa Bikas Bank Ltd.
_____ Branch

Dear Sir,

I/We, hereby request you to activate my/our account as details below, which is in dormant status. Further, l/We hereby indemnify and undertake to hold your bank harmless all the time from any and all possible losses and consequences arising out of reactivating my/our below detailed account.

Account No: | | | | | | | | | | | | |

Account Name: | | | | | | | | | | | | | | | | | | | | |

Address: _____

Present Deposit/withdrawal amount: _____

Reason for not operating account for a long period: _____

_____

Please collect necessary charges, if any from my/our account held with your bank. Thanking You

_____
Applicant's Signature(s)

FOR OFFICE USE ONLY

Signature verified by_____ Approved by_____

Remarks (if any): _____