

# JAGRUTI CO-OPERATIVE URBAN BANK LTD.

33-10/3, VAYUPURI, SAINIKFURI P. O., SECUNDERABAD-500 094

## APPLICATION FOR SAFE DEPOSIT LOCKER

Date.....

To,  
The Manager,  
JAGRUTI CO-OPERATIVE URBAN BANK LTD.

.....

Dear Sir,

I/We hereby apply for a Safe Deposits Locker of Class.....  
.....in the Safe Deposit Vault of the Bank  
for a period of.....from.....  
I am/We are prepared to pay the rental for the vault in advance as per Rules of the  
Bank. I/We have read the rules in regard to the rental of and access to Safe Deposit  
Vault Lockers and hereby agree to be bound by them and also agree to the rules made  
by the Bank from time to time.

The operations on the Safe Locker will be conducted by.....  
on/my/our behalf and I/We hold myself/our selves bound by all acts done by my/our  
authorised representative.

Address :

Yours faithfully,

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Signature of Applicant (s)