The Chief Mana	ager,		
SBP Banking S	Services	Cor	poration

PPB-1(A)

\_\_\_\_ Office

## <u>APPLICATION FOR PURCHASE OF PREMIUM PRIZE BONDS - CORPORATE</u>

 $Please\ accept\ application\ for\ purh case\ of\ Premium\ Prize\ Bonds.\ Compelete\ details\ are\ as\ under:$ 

_		_													-							Da	ate			-			-				
													Ap	plica	nt	Insti	tution	Deta	ils						•								
Name of Ins	titut	ion																															
NTN / FTN o	of Fir	m																	-						Т	Гуре	of I	nstit	utio	n			
Registered A	Addr	ess																					Sole	e Pro	prie	eters	ship						
																							Par	tner	ship	)							
Mailing Add	ress																						Lim	ited	Con	npai	ny/(	Corp	orat	ion			
																							Tru	st, C	lub,	etc							
Sales Tax Re	giste	erati	on N	lo. (	if ar	ny)																	NGO	Os/N	NPOs	s/Ch	ariti	ies					
Telephone N	lo.											OR											Gov	ern	men	t De	part	men	ıt				
Date of Inco	rpor	atio	1			-			-					Ema	ail A	Addre	ess		•														
Nature of Bu	ısine	SS			Ser	vice	S			Ma	nufa	ctui	ing			Tra	de				Tru	st/N	IGO			Oth	er						
										•				Ban	ık A	ccoı	ınt Det	ails						•	•								
Bank Name																		Ban	k Br	ancł	1												
Account Titl	e																ı.																
Internationa	ıl Ba	nk A	ccou	ınt l	Nun	nber	(IE	BAN	)		P	K																					
						M	ode	e of	Pav	yme	nt										]	Prer	niur	n Pı	ize	Bon	ds F	Regu	iirer	men	t		
Cash												eceiv	zed (	Cash	/Ch	eque	e of		D	eno		atior					eces				ue (	Rs.)	
Cheque	/PO/	'DD									Rs									4	0	0	0	0									
Cheque No.																			1	0	0	0	0	0									
Bank						11														I	To	tal		I									
Branch												(0:		,	. c.																		
Amount (Rs.	.)													ure & orize		amp] icer	)																
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Already purc	hase	d Pre	miu	n Pı	rize	Bono	l(s)																										
SMS/Email A	lert f	or Pr	ofit	and	Priz	ze Mo	ne	y Pag	yme	ent(s	) on	the	mob	ile nı	ımb	er m	entioned	l abov	ve.														
Expemted fro	m W	ithol	ding	Тах	(Pl	ease	att	ach l	Exe	mpti	on (	Certif	icate	e)																			
														Aut	hor	ized	Signato	ries															
			A	uth	oriz	zed S	ign	atoı	ry 1												Α	Auth	orize	ed Si	gnat	tory	2						
Name																Nar	ne																
Designation																+	ignatio	n															
CNIC No.						-								-			C No.							-							<u> </u>	-	
CNIC Expiry									Gei	ndei	•					CNI	C Expiry	,								Ger	nder			N	MAL	Е	
Mobile Num	ber		+													Mol	bile Nui	nber			+										<u> </u>		
			A	uth	oriz	zed S	ign	atoi	ry 3												P	luth	orize	ed Si	gnat	tory	4						
Name Name																																	
Designation	1											ı				+	ignatio	n	1	I		I		1	ı	1	I	ı					
CNIC No.						-			_	Ļ				-		_	C No.	1						-			<u> </u>		Ш	Ш		-	
CNIC Expiry									Gei	ndei	•			1		+	C Expiry	1								Ger	nder		<u> </u>			1	1
Mobile Num	ber		+													Mol	bile Nui	nber			+										<u> </u>		

		Operating Instruction	iS									
	Singly (Any one) Jointly											
*Dul	lly signed Authority letter contaning operating instructions by all Partners/Directors/Trustees/Members must be attached											
		Terms & Conditions										
2. Al char 3. IB 4. Tl deta 5. Tl 6. Tl 7. Tl 8. Al form 9. Al 10. A	ange in the account number, the institution sha BAN provided by the applicant must be in the The information provided in this application for ails or concealment of facts of any nature wha The signature of authorized signatories must be Transfer of Bonds shall not be available to Cor The Currency Transaction Report (CTR) / Susp Any cutting/overwriting/mutilation must be a m(s) with more than two cuttings/overwritin Any changes in the details provided by the inst All documents provided by the institution must a authorized signatories read & understood the	e Bonds (Registered) Rules 2017.  offit and Face value (as the case may be) will be all immediately inform the Bank.  e name of institution only.  orm by the institution shall deemed to be true atsoever, the institution shall be held responsible as per their CNIC/SNIC provided.  The proposed investor(s).  picious Transaction Report (STR) shall be appropriated by the authorized signatories was will not be accepted.  titution in the application form must immediated be endorsed by the Company Secretary of	be credited to the IBAN provided in this application form. Any the & complete by the Bank and any misinformation or incorrect sible.  Splicable as per relevant laws.  With their full signatures as per CNIC / SNIC. Further, application siately be infomed to the Office of Issue in writting.									
Ā	Authorized Signatory 1 Authorized	Authorized Signator FOR OFFICE USE ONLY										
Tho	Application form is in Order and the require	ed documents have been obtained Following	Premium Prize Bond(s) have been issued to the Firm:									
THE												
	Denomination(s) Series S	Serial (From) Serial (To)	Pieces Value (Rs.)									
	4 0 0 0 0											
	1 0 0 0 0 0											
	To	otal										
Rece	Officer (Name, Signature & PIN)  ceived following Premium Prize Bonds:  Denomination(s) Pieces  4 0 0 0 0 0	Sr. Officer (Name, Signature & PIN)  Acknowledgment  Value (Rs.)  Authori	Officer/Sr. Office (IMU) (Name, Signature & PIN)  ized Signatory 1  Authorized Signatory 2									
	1 0 0 0 0 0 0 Total		ized Signatory 3 Authorized Signatory 4									