



INITIAL INVESTMENT FORM: *CORPORATE APPLICANT*

SERIAL NO.: _____

See general instructions at the back of the form

*Please note that minimum initial investment is 250 units

Date: _____

Amount Paid (₹ / US \$): _____

Please tick as appropriate:

Bankdraft Cheque Cash

RECEIVING AGENT (Name and Stamp/Seal): _____

Please Affix
Stamp/Seal

PLEASE COMPLETE IN BLOCK LETTER

Full company name: _____

Address: _____

Contact Telephone/Fax Number: _____ E-mail address: _____

Corporate Seal:

Please Affix
Stamp/Seal

Incorporation No.: _____

Name and Address of Bank: _____

Account Number: _____

Name of Authorised Signatory: _____ Name of Authorised Signatory: _____

Usual Signature: _____ Usual Signature: _____

Designation: _____ Designation: _____