

The Manager,

PPB-CB-1-A

Bank

Branch

Dated: _____

APPLICATION FOR REGISTRATION - PREMIUM PRIZE BONDS (REGISTERED)
(CORPORATE ONLY)

<input type="checkbox"/> NEW REGISTRATION					<input type="checkbox"/> AMENDMENTS IN EXISTING REGISTRATION				
Applicant Institution Details					Type of Institution				
Institution Name					Sole Proprietorship				
NTN / FTN					Partnership				
Address:					Limited Company/ Corporation				
					Trust, Club, etc				
Contact No.					NGOs/NPOs/Charities				
Date of Incorporation					Government Department				
Operating Instructions					<input type="checkbox"/> SINGLY <input type="checkbox"/> JOINTLY				
Please tick the relevant option.								YES	NO
I/we want to receive SMS Alert for Profit and Prize Money Payment(s)									
Exempted from Withholding Tax (Please attach Exemption Certificate)									
Account Details (Mandatory)									
IBAN	P	K							
Account Title									
Bank Name					Bank Account Details Verified (Stamp & Signature of Branch/Operations Manager)				
Branch Name									
Authorized Signatories.									
Name					Name				
Designation					Designation				
CNIC No.					CNIC No.				
TERMS & CONDITIONS									
<ol style="list-style-type: none"> 1. This Scheme is governed under Premium Prize Bonds (Registered) Rules 2017. 2. All payments with regards to Prize Money, Profit and Face value (as the case may be) will be credited to the IBAN provided in this application form. Any change in the account number, the institution shall immediately inform the Bank. 3. IBAN provided by the applicant must be in the name of institution only. 4. The information provided in this application form by the institution shall deemed to be true & complete by the Bank and any misinformation or incorrect details or concealment of facts of any nature whatsoever, the institution shall be held responsible. 5. The signature of authorized signatories must be as per their CNIC/SNIC provided. 6. Transfer of Bonds shall not be available to corporate investor(s). 7. The Currency Transaction Report (CTR) / Suspicious Transaction Report (STR) shall be applicable as per relevant laws. 8. Any cutting/overwriting/mutilation must be authenticated by the authorized signatories with their full signatures as per CNIC / SNIC. Further, application form(s) with more than three cuttings/overwriting will not be accepted. 9. Any changes in the details provided by the institution in the application form must immediately be informed to the Office of Issue in writing. 10. All documents provided by the institution must be endorsed by the Company Secretary of the institution (if applicable). 11. The authorized signatories read & understood the terms & conditions as mentioned above and shall comply with the relevant rules and regulations in letter & spirit. 									
Signature _____			Signature _____			Company Seal			
FOR BANK USE ONLY									
Verification of Registration.					The information has been verified from the relevant documents / bank record and reported to SBP BSC / Main Branch				
Authorized Bank Officer					_____ on _____				
					Authorized Bank Officer			Authorized Bank Officer	