

**APPLICATION FORM FOR APPOINTMENT AS AUTHORISED AGENT**

(To be used by individuals only)

To.....

Sir,

I desire to act as an Authorised Agent for the sale of 7-Year National Savings Certificates (II Issue),2,3 & 5-Year Time Deposits, 6-Year National Savings Certificates (VI and VII Issues), Social Security Certificates and other small savings securities, which may be notified by the Government of India from time to time as securities which Authorised Agent may canvass.

- 2. (a) My full name is.....
- (b) My father’s name is.....
- (c) My occupation is.....
- (d) My business.....
- (e) My residential address is.....
- (f) My age is.....

3. I declare that (i) I am not a close relative i.e., wife, husband, legitimate child or step child, father, mother, sister or brother, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law or daughter-in-law of employee of P & T Department working any where in India or depending upon him; (ii) I am not a close relative of an employee of the National Savings Organisation and (iii) I am not employed under the Central or State/Union Territory Government.

3.(A) I declare that none of my near relatives (i.e. my wife/husband legitimate child or step child, my father/step father, mother/step mother, brother/step brothers, sister/step sister, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, or daughter-in-law) is employed under the Central or State/Union territory Government.

OR

I give below the particulars of my near relatives (i.e. my wife/husband, legitimate child or step child, my father/step father, mother/step mother, brother/step brother, sister/step sister, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, or daughter-in-law) who are employed under the Central or State/Union Territory Government :

Name of relative	Relation ship with applicant	Name and address of office where employed
------------------	------------------------------	---

- 1
- 2
- 3
- 4

---

I attach the communications (s) in original form the Head (s) of Office/Department where the above mentioned persons (s) is/are employed to the effect that there is no objection to my being appointed as agent under the Standardised Agency Scheme.

4 (a) I request that for the sale of certificates issued through post offices I may be attached to the undernoted Post Offices.

- (i).....G.P.O./H.P.O./S.P.O./B.P.O
- (ii)..... G.P.O./H.P.O./S.P.O./B.P.O
- (iii).....G.P.O./H.P.O./S.P.O./B.P.O

(b) In respect of certificates issued through other agencies, I may be attached to the following Office (s) :-

- (i).....
- (ii).....
- (iii).....

5. \*In the event of my appointment being approved, I shall-

(a) put up two acceptable sureties each guaranteeing to extent of Rs.....

OR

(b) Furnish security in cash or in the shape of Government securities totalling the issue price of Rs.....

OR

(c) Furnish one surety of a bank for Rs.....

OR

(d) Furnish a Fidelity Guarantee Policy of the value of Rs.....

6. I agree to abide by all the rules, regulations, instructions, etc. regarding the appointment of authorised agents at present in force and as may be amended from time to time.

7. I previously worked as Authorised Agent at .....during the year (s).....

OR

I have not so far worked as Authorised Agent

8. I may be allowed to obtain Receipt Books from (Name and address of Issuing Authority)

9. Give names and address of two \*responsible persons known to you-

---

1.

2.

---

\*A Gazetted Officer/Member of Parliament/Metropolitan Municipal Councillor/Headmaster of a recognised school Registered Medical Practitioner/Practising Advocate/Chartered Accountant/Bank Manager/Village Pradhan/Sarpanch/Chairman, Block Panchayat Samitis.

Yours faithfully,

Place.....

Date .....

Signature of Applicant

\*Does not apply to Government Servants appointed as Internal agents

(To filled up only if the applications is recommended by some body)

Name..... Signature.....

Full Address..... Designation.....

..... Date.....

(To be filled up in the Office of the Appointing Authority)

1. Application scrutinised by.....

Signature.....Designation.....

2. Applicant's appointment as Authorised Agent approved on.....  
(Date) after verifying the solvency of the sureties in cases where  
sureties are put of.

3. Agreement completed on.....(Date)

4. Certificate(s) of Authority bearing number (s).....issued  
On.....(Date).

5. Signature of Appointing Authority.....

6. Designation of Appointing Authority.....

Date.....