Specimen Signature Card

For Account Holder



MM

DD

Effective From:

Account No:

Full Name (Account Holder/ Authorized Signatory)	Signature with S	eal (If Applicable)	Signature Admitted by (Bank Official)
			Authorized Signature
			A.S./P.A. No. :
			Bank Seal
Special Instruction(s):			
Signature Signatur	re Si	gnature	Signature
			Date :

Instructions for Filling in Specimen Signature Card:

- 1. Please fill-in the card in block (capital) letters;
- Please put your Signature and Seal/Stamp within the specified area;
- 3. Please use dark black ink;
- 4. Please do not overlap the Seal/Stamp with Signature;
- 5. Please use additional Specimen Signature Card(s), if required;
- Please use additional paper duly signed and stamped for special Instruction(s), if required.