

**APPLICATION FORM FOR ALLOTMENT OF ACCOMMODATION  
AT 'DHARANI THARAK BHAVAN', GUNTUR**

Date :

To

The President,  
State Bank of India Staff Mutually Aided  
Co-operative Credit Society Limited,  
SBI Buildings,  
Kannavari Thota,  
**GUNTUR – 522 004**

**PHONE: 0863-2323127**

**FAX No: 0863-2211037**

Dear Sir,

1. I shall be glad if you please allot me Super Deluxe Room A.C. / Family Suite A.C. / Mini Deluxe Suite A.C at '**Dharani Tharak Bhavan**' situated at **Guntur** for a period of \_\_\_\_\_ day(s) from \_\_\_\_\_ to \_\_\_\_\_. The rules have been read by me. I shall abide by the rules and declare that I shall pay all dues payable by me. A crossed Demand Draft / Journal No. \_\_\_\_\_ dated \_\_\_\_\_ for Rs. \_\_\_\_\_ favouring "**SBISMACCSL – DHARANI THARAK BHAVAN GUNTUR**" drawn on **GUNTUR** / receipt of rental credit to the **Account No. 38771769997** is enclosed towards advance payment of rent.

2. The accommodation is meant for the use of member / non-member.

3. Details of family members who will accompany me are furnished hereunder:

<b>Sl.No.</b>	<b>Name</b>	<b>Relationship</b>	<b>Age</b>
1			
2			
3			
4			
5			

Encl: as above.

Signature of the Applicant

Name :

Designation :

Branch :

Mobile :

Fax No. :