



GOVERNMENT OF TRIPURA  
FINANCE (SMALL SAVINGS, GROUP INSURANCE &  
INSTITUTIONAL FINANCE) DEPARTMENT

**The Tripura Protection of Interest of Depositors  
(In Financial Establishments)  
Rules (Amendment) Rules, 2011.**

FINANCE (SMALL SAVINGS, GROUP INSURANCE & INSTITUTIONAL  
FINANCE) DEPARTMENT  
GOVERNMENT OF TRIPURA

NO.F.12 (5)-DIF/C-I (P-II)/SHADOW/ Dated, Agartala, 16<sup>th</sup> August, 2011.

**NOTIFICATION**

In exercise of the powers conferred by Sub-Section (I) of Section – 16 of “The Tripura Protection of Interest of Depositors (in Financial Establishments) Act, 2000”, the Governor of Tripura, is hereby pleased to make the following rules to further amend “The Tripura Protection of Interest of Depositors (in Financial Establishments) Rules, 2007” namely: -

**Short title and commencement**

1. (1) These Rules may be called “The Tripura Protection of Interest of Depositors (in Financial Establishments) Rules (Amendment) Rules, 2011”.
- (2) They shall come into force immediately.

**Amendment of Rule 2**

2. In The Tripura Protection of Interest of Depositors (in Financial Establishments) Rules, 2007 (hereinafter referred to as the Principal Rules) the existing rule 2 shall be substituted with the following:

“2 Definition: In these rules, unless the context otherwise requires:-

- (a) ‘Act’ means The Tripura Protection of Depositors (in Financial Establishments) Act, 2000.
- (b) ‘Authorized Officer’ means an Officer authorized by the State Government by notification in the Official Gazette to act as one under these Act and Rules
- (c) ‘Form’ means a Form setout in schedule-I or its translation in any official language.
- (d) ‘Section’ means section of the Act.
- (e) ‘Schedule’ means schedule appended to these Rules

The words and expressions used herein but not defined in the Rules shall have the meanings assigned to them in the Act.

3. After rule 3 of the Principal Rules, the following new rules shall be inserted, namely: -

**3A (1)** Every Financial Establishment before starting operation in the State shall intimate details of its business as required as per section 3A(1) of the Act to the Competent Authority in Form No. 5 (Five).

(2) Every Financial Establishment shall file monthly statement about its business as required as per section 3A(2) of the Act to the Competent Authority in Form No.6 (Six).

(3) The Authorized Officer may direct any Financial Establishment within his jurisdiction to furnish within a reasonable time period prescribed by him any other statements or information as per section 3A (3) of the Act.

(4) The Authorized Officers shall send a report to the Competent Authority after conducting any inspection or examining any statement or books of account under Section 3A of the Act.

(5) Appeal against the orders passed by the Competent Authority shall be heard under section 3 A (9) of the Act by the Secretary Incharge of the Finance Department, Government of Tripura.

**Amendment of schedule - I**

4. In Schedule -I of the Principal Rules, the form 5 & 6 shall be inserted namely,

Form No. 5 - Intimation of Business.

Form No. 6 - Monthly Statement of Business Transactions.

By Order of the Governor

Manoj Kumar  
Commissioner & Secretary to the  
Government of Tripura.

To be appended at the end of Schedule - I

Form No. 5.  
(See Rule 3A (1))  
Intimation of Business

To \_\_\_\_\_  
The \_\_\_\_\_

(Competent Authority)

Sir,

I / We, Shri / Smt ..... (Designation in Financial Establishment) hereby intimate detail about the business of my / our financial institution for your kind information:

1. Name of the Establishment:
  - (a) Registered Head Office (Address, Phone, email) :
  - (b) Local Head Office( Address, phone No., email ) :
  - (c) Name of Board of Directors with address, phone, email:
  - (d) Location of offices in Tripura (address, phone, email):
2. Name of Non-Banking Financial Company / Un-Incorporated Bodies:
3. Commencement of business in the State:
4. Nature of business :
5. Name and Designation of permission/sanction Issuing Authority. :
6. Registration No. with RBI / SEBI / IRDA / ROC/Others:
7. Trade License from Agartala Municipal Council / Nagar Panchayat, if any:
8. Registration No. under Sales Taxes/VAT Act, if any -
9. Registration No. of Labour Department under Shops and Establishments Act:
10. Any other registration/authorization –
11. Details of Moveable/Immovable Assets held in Tripura and outside:
12. Details of bank account in Tripura and outside:
13. Nature of scheme started / proposed to start in State –

(Signature & designation  
of Authorized person of Financial  
Establishment)

**Form No. 6.**  
**(See Rule 3A (2))**  
**Monthly Statement of Business Transactions**

1. Name of the Establishment:

(a) Registered Head Office (Address, phone No, email )

(b) Local Head Office ( Address, phone No, email )

(c) Branch Office : ( Address, phone No, email )

2. Statement for the month :

(A)

(Rs.in lakhs)

| Sl. No. | Scheme | Deposit |      | Matured Payment made |      | Pre mature Payment made |      | Payment Pending |      | Reasons for pendency |
|---------|--------|---------|------|----------------------|------|-------------------------|------|-----------------|------|----------------------|
|         |        | No.     | Amt. | No.                  | Amt. | No.                     | Amt. | No.             | Amt. |                      |
|         |        |         |      |                      |      |                         |      |                 |      |                      |

(B)

| Sl. No. | Scheme | Amount of money collected from sale of land / providing services / supply of goods and others. |      | Payment made |      | Pending Payment |      | Reasons for pendency |
|---------|--------|--|------|--------------|------|-----------------|------|----------------------|
|         |        | No.  | Amt. | No.          | Amt. | No.             | Amt. |                      |
|         |        |  |      |              |      |                 |      |                      |

(C) Complaint received from depositor / Subscriber, if any, and action taken thereon -

**Place:**

**Date:**

**(Signature & designation  
of Authorized person of  
Financial Establishment)**