

*(For opening add on domestic term deposit accounts for individuals – single/joint)*

To  
**The Branch Manager, Indian Bank**

**Account Number** (to be filled in by Bank)

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..... Branch

Date:

**My/Our CIF No.**....., , ..... **with your branch**

I/We, the account holder(s) with the above CIF number(s) in your branch, hereby tender \*Cash/ \*Cheque for opening the following term deposits in my/our name(s) as per details furnished:

<b>Sole/First Applicant Name</b> <sup>§</sup>		Staff <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Joint Applicant Name</b> <sup>§</sup>		Staff <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>§ If Minor, Date of Birth</b>		

**Scheme of Deposit**       Fixed Deposit     Reinvestment Plan     Recurring Deposit     Short Term Deposit

**Period of Deposit**      ..... Years      ..... Months      ..... Days    **Rate of Interest:** ..... % p.a.

**Amount of Deposit/Monthly Instalment amount (in case of RD)**

<b>Rs.</b>
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**Special Instructions:**

- i. Mode of Operation      :  Self only     Jointly     E or S       A or S
- ii. Nomination            :  Nomination is required - **Form DA 1** enclosed     Nomination is not required
- iii. Standing Instructions

**Fixed Deposit:** Please pay interest at ..... interval and credit the same to my/our SB/CA No ..... with your branch

**RD:** Please debit my/our SB/CA No..... with your branch for Rs..... towards the monthly instalments on ..... (date)

I/We hereby declare that all other information/instructions/declarations/undertakings given by me/us vide my/our earlier application dated ..... remain unchanged and are applicable for the scheme/product/service opted in this application.

Yours faithfully,

..... (signature of sole/first applicant)

..... (signature of joint applicant)

**FOR BRANCH USE ONLY** *(to be filled in by the official authorising the account opening)*

Sole/First Applicant's Name ....., CIF Number .....

Joint Applicant's Name ....., CIF Number .....

and their signature(s) verified in the system.

Account Opened in the system by ..... (name of staff)

TDR/RD Product Code ..... Account Number:..... TDR Receipt Number: .....

TDR Receipt / RD pass book delivered to the customer on .....

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**Signature of BM/ABM/Authorised Official**

**Name and SS No.**

**Date:** .....

Space for Noting the que/reference/journal numbers

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