

Date **For Bank Use Only**Unique Customer ID A/C No. **FD/SCHEME ACCOUNT OPENING FORM**

This form should be completed in "ENGLISH CAPITAL" letters.

Manager
The City Bank Limited BranchDear Sir,
I/we am/are applying to open the following account in your branch. My/our detailed information is given below:**Account Title**English বাংলা **Type of Account** Fixed Deposit (FD) Monthly Interest Paying FD Others (Please Specify) Goal Based DPS Insurance Backed DPS Others (Please Specify)**Nature of Account** Individual Joint Non - Individual**FIXED DEPOSIT INFORMATION****Currency** **Amount** **Interest** - %**Amount in words** **Period/Tenure** (Please select any one option from below and specify Days/Months/Years) Days Months Years **Maturity Date** **Debit Instruction** Please Debit My/Our Account No. **Maturity/Disposal Instruction****Auto Renewal**
 Yes (If Yes, Please select any 1 option)
 Renew principal only and credit interest to the Account No.
 Renew both principal and interest
 No Encash at Maturity to My/Our A/C No.

Note: In case of auto renewal, if prior written notice is not served to the Bank, the bank will automatically renew the deposit plus accrued interest for the period as per banks on the maturity date at the prevailing rate of interest.

SCHEME INFORMATION**Name of Scheme** **Period of Scheme** Months**Amount per Installment** **Amount in Words** **Frequency of Installment** **Installment Start Date** **Payable amount at Maturity** **Payable amount at Maturity (In words)** **Debit Instruction** Please Debit My/Our Account No. **NOMINATION DETAILS** New Nominee Assignment: Please fill out the "Nominee Assignment Form" Same as Operative Account No. No. of Nominee

Nominee Details & Photograph Checked by

DETAILS OF GUARDIAN FOR MINOR APPLICANT - **GUARDIAN MEANS FATHER/MOTHER/LEGAL GUARDIAN

I, being the lawful Guardian of the following applicant(s), hereby declare that the applicant(s) is a minor, His/Her/Their necessary information has been furnished in the enclosed Individual Information

Name of the Minor Applicant(s)	1 <input type="text"/>	2 <input type="text"/>	3 <input type="text"/>
Date of Birth of Minor	1 <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>	2 <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>	3 <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>
Name of the Guardian(s)	1 <input type="text"/>	2 <input type="text"/>	3 <input type="text"/>
Relationship with the Minor	1 <input type="text"/>	2 <input type="text"/>	3 <input type="text"/>

* Individual Information Form must be filled in for both the Minor and the Guardian. Both forms must be signed by the Guardian.

Signature of Guardian

TERMS & CONDITIONS

These terms and conditions must be read in conjunction with the Schedule of Fees, Charges, Interest Rates for Fixed Deposit/DPS Accounts as may be revised/amended by The City Bank Limited ("the Bank") from time to time integral part of the Terms and Conditions of Account (as amended from time to time) unless otherwise expressly set out herein. Details about the account(s), operation and maintenance of the account(s), periods, rates of interest and minimum deposits are available upon request. Upon submission of your application, it is warranted that you have read and understood the terms and conditions, features and details related to the account(s) and being satisfied thereof, requested to open the above-mentioned account(s).

- Bank shall debit my/our designated bank account maintained with the Bank for crediting into the Fixed Deposit/DPS Account(s). For DPS Accounts, an amount as instructed by me/us shall be debited from the designated Account on a regular basis for the period as mentioned.
- In case of early encashment before the maturity date, on interest shall be payable provided always that the Bank shall have the option to pay interest in respect of such account as such rate(s) and in respect of period as the Bank May determine in its discretion.
- If there are insufficient funds in the designated account on the date on which it is to be debited or if for any reason the Account is not credited with the monthly savings amount on the date on which it to be credited, the Bank shall be entitled without demand or notice, at its discretion, to terminate the Account or convert the same to a savings or other type of account. The Bank reserves the right to impose a fee under such circumstances. For the evidence of doubt, no interest shall be payable in respect of the balance in the account provided always that the Bank shall have the option to interest in respect of such account as such rate(s) and in respect of such period(s) as the Bank may determine in its discretion.
- Any Fixed Deposit Advice issued by the Bank is not receipt. It is only evidence of deposit and not a document of title and is not transferrable. It cannot be pledged as security. Immediate written notice should be given to the Bank if the deposit advice is not received by the Customer or is lost, stolen, destroyed or mislaid.

SIGNING AUTHORITY AND ACCEPTANCE OF TERMS & CONDITIONS

I/We declare that all information / instruction / authorization provided by me/us relating to my/our operating account, all terms and conditions and any subsequent changes thereon shall be applicable to this Fixed Deposit/DPS Account. I/We declare that I/we will not get any tax benefit (as applicable), If I/we do not submit tax documents at the time of opening of Fixed Deposit/DPS Account.

*Mode of Operation of A/C **Singly** **Jointly** **Anyone** **Either or Survivor** **Others**

<input type="text" value="1st Applicant Signature"/>	<input type="text" value="2nd Applicant Signature"/>	<input type="text" value="3rd Applicant Signature"/>
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* Affix seal where applicable. * All joint Account holders are required to sign, regardless of mode of operating.

FOR BANK USE ONLY

Mandatory Fields for Regulator

SBS Code	<input type="text" value=""/>	Deposit Type Code	<input type="text" value=""/>
Name of DSE/ Branch Employee	<input type="text" value=""/>	RM/Employee Code	<input type="text" value=""/>
Monitoring RM	<input type="text" value=""/>	Monitoring RM Code	<input type="text" value=""/>
Tax Applicable	<input type="checkbox"/> Yes <input type="checkbox"/> E-TIN Exists <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> Tax Waiver Documents submitted, where applicable <input type="checkbox"/> E-TIN Documents submitted, where applicable		
A/C Occupation Code	<input type="text" value=""/>	Scheme Product Code	<input type="text" value=""/>
		FD Product Code	<input type="text" value=""/>
Branch SOL	<input type="text" value=""/>	Value Date	<input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>
Comment	<input type="text" value=""/>		

<input type="text" value="Signature with Name Seal & Date Account Opened by"/>	<input type="text" value="Signature with Name Seal & Date Recommended by (BOM)"/>	<input type="text" value="Signature with Name Seal & Date Approved by BM/Designated Officer"/>
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