		RT A2 Term Deposits)							
A/C Number			For	Office use only:					
Primary Applicant Name		CIF No.							
Joint Applicant Name		CIF No.							
Standing Instruction DEBIT AC	CCOUNT	CREDIT ACCOUN	Т						
	TERM DEPOSIT	OPENING DETAILS							
Deposit in Indian Rupee Select any one NRE FD N		NRO STD Capital Gair	ns Tax Saver	Deposit for Returning N	IRIs (RFC)				
Any other FD / N	MMD								
Deposit Amount	Tenor Year Mon	ths Days							
	red/paid in 1. NRE A/c 2. NRO A/c	*For Payout details. pl	er-1 Credit to Ad 2 Outward re ease attach a separate instruct Maturity (NRE/NRO/FO	emittance ion					
Initial Payment by Cheque/DD/Wi		SWIFT		Date D D M M Y	Y				
Deposit in Foreign Curr									
Select any one FCNR Deposit	IND Rupee Gain Deposit for Re	eturning NRIs (RFC)	Any Other Deposit						
Currency:	(Please specify the cu	rrency).	Am	ount					
Bank / Branch Name		FD Type W	ithdrawable No	n Withdrawable					
	RECURRING DEPOS	IT OPENING DETAIL	_S						
NRE RD	IND Millionaire RD-NRE Flexi RD	Deposit Amount		Tenor	Months				
Debit NRE A/c for instalment No.		Maturity Amt. to NRE A	VC No.						
NRO RD									
Debit NRO A/c for instalment No.		Maturity Amt. to NRO	A/C No.						
Add Standing Instruction (SI) for RI	Debit Account No.	New	RD Account No.						
SI Frequency Monthly Qua	rterly Half-Yearly Yearly	Period	SI Execution	Date DDMMYY	YY				
Mode of Operation									
Self Jointly by all Former or Survivor*	Either or Survivor Minor A/C operated by g			Anyone Single or Surv					
authorize you to debit our SB/CA According equivalent Rupee amount based on the control of the c	my/our name(s) as per details furnished above, sount No	f Term Deposit/s requested to e of opening of the Term Depos	b be opened. In the casit/s may be debited.	e respective scheme of depo ise of a foreign currency de a / Thumb impression	sits. I/We eposit, the				

lagA	cation for	Booking For	ward Contrac	t cum dispos	sal instru	iction for IND	Rup	ee Gain	
With reference of my existing N proceeds of the	to my/our request IRE CA/SB accour referred deposit n	for placing FCY Te nt /against the in naturing on	rm Deposit with you fo ward remittance for (F to Indian Rup	r(FC CY) value dated (pees. Accordingly, I/w	CY amount) ur) fo ve want to boo	nder IND Rupee Gain c or (period), I/we w ok a forward contract	leposit s vish to co with Ind	scheme to the debit onvert the maturity lian Bank for	
`	,	` '	est) of the deposit, the d	<i>,</i> ,	`	•			
	, ,	•	d Purchase Contract v : till its maturity date.	vitn inalan Bank, wni	cn snall matu	ire on the maturity ac	ite of th	ne deposit, i/we am	
			Rupee Gain A/c. No alue of the deposit to IN						
cancellation ch	arges, swap cost c	and any other char	f the deposit will neces ges as per prevailing ra	ites, to the debit of my	y/our NRE SB/0	CA account.			
	•		of the deposit, I/we ma e mature closure of the		, 0		•		
•	•	•	ur SB NRE A/c for the ar	•		•			
		•	ne forward contract wi rtain information abou		•	•		and as part of the	
Place			Signature of Primary Applicant			Signature of Joint Applicant			
Date D D M M Y Y Y Y			Name of Primary Applicant			Name of Joint Applicant			
			Nominat	ion Form - DA 1					
Nomination un	der Section 45 'ZA	' of the Banking R	egulations Act, 1949 ar		g Companies	(Nomination) Rules,	1985 in 1	respect of bank	
deposits		_							
			m in the event of my/ou						
-									
		Dep	osit		Nomine	ee			
Nature of deposit	Distinguishing No.	Additional details, if any	Name	Address		Relationship with depositor, if any	Age	If nominee is a minor, date of birth	
						ii diiy		OI BII III	
			(nam						
*2 Bank offic	ial/representative	have briefed me/	ne event of my / our / mi us about the advanta ation and demand that	ges of nomination a	nd requested	to fill nominee detail		considering Bank's	
	APITAL LET			. те ватк зпосіс оре	i i i i i i i i i i i i i i i i i i i	dinas without normine	ition.		
luce C /	APITAL LEI	TIEKS ONL							
Date D D N	M M Y Y Y Y		Primary Appl	icant Signature / Thun	nb impression	Joint Applicant Sign	ature /	Thumb impression	
Name and Address of witness (If applicable @)						Signature of witness (If applicable @)			
Name and Address of witness (If applicable @)						Signature of witness (If applicable @)			
Note: *1Where der			omination should be signe		ntitled to act on l				
			n(s) shall be attested by tw						
			For Of	fice Use Only		O Nie		La tet a la	
						Queue No.		Initials	
Date D D N	MMYYYY			Accou					
		Aut	thorised Signature	CIF Lir					
					/al of Posting	9			
				Scann	ing				
*				-				~	
			Nomination <i>i</i>	Acknowledgem	nent				
I. We ackn	owledgement recei	ipt of nomination n	nade by you in favour of	f:					
						Age:	_ Year w	vith respect to your	
Account N	0		Registr						
II. No nominee for the account since nomination facility not availed by the account holder.					Signature of Bank Official				
It is highly advi		nominee on accour	nt opened under a single	e name. Appointing a	nominee is be	neficial for the			
1. If the acco			ass on the funds in the a aiming benefits.	account to the nomine	ee.				