



विजया बैंक
VIJAYA BANK
IN FRONT OF YOU IS OUR SERVICE
A friend you can bank upon

Term Deposit Account Opening Form

(For existing customers)

Date: _____

Branch Code

Account No.

Customer's ID

Dear Sir,

I/We herewith request you to open a **FD/VCC/VSU/RD/V-GenU™ Unnati RD** etc. account in my/our name/s as under :

FULL NAME (IN BLOCK LETTERS)

(A)

(B)

Guardian

Relationship with minor

Recurring Deposit Account		Other Term Deposits	
Monthly Instalments	Amount ₹	Type of A/c	Amount ₹
Period	Months	Period	Months
Repayment Instructions			
Please debit monthly instalments of RD A/c from my/our A/c No.		Auto renewal of deposit	Required / Not required
<input type="text"/>		<input type="text"/>	
Date of Birth		Please renew for a further period of _____ months if you don't receive any instructions to the contrary	
<input type="text"/>		<input type="text"/>	

Please credit the maturity proceeds of the deposit to my/our SB / CA account Number

At _____ Bank _____ Branch, subject to fulfilment of repayment conditions of deposit or any other instructions given to the contrary.

Nominee (with address & relationship)

Name

Address

State Pin

Telephone/Landline Mobile

E-mail

Relationship

If nominee is minor, date of birth of minor

If nominee is minor, name and address of a major to receive the payments

Name

Address

State Pin

Telephone/Landline Mobile

E-mail

I/We have already furnished our address and other customer profile details as I/We am / are existing customers of the branch having (SB/CA) A/c No with customer identification number mentioned above. The terms and conditions contained in the original application form and the rules of business of the deposit scheme are binding on me/us.

1. 2.

(Signature of Depositor/s)
[Thumb impression should be witnessed]

Details	Witness 1	Witness 2
Signature		

Witness 1

Name

Address

State Pin

Telephone Mobile

E-mail

Witness 2

Name

Address

State Pin

Telephone Mobile

E-mail

Deposit particulars

Date	Type of A/c	A/c No.	Amount	Period	Rate of Interest	Maturity Date	Entered by	Checked by

Acknowledgement for Term Deposit Receipt

[To be signed only at the time of receiving Deposit Receipt]

Received the term deposit receipt bearing Account No:

and Printed No:

Signature of Depositor Name: Date:	Signed before me Officer: Date:	AGM/CM/SBM/BM Date:
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