

TERM DEPOSIT ACCOUNT OPENING FORM

(For Existing Customers)

FEDERAL BANK

YOUR PERFECT BANKING PARTNER

To, The Manager, Br.

Date:

I/We request you to open a Term Deposit Account in my/our name(s) as per the details below:

Deposit Category: <input type="checkbox"/> Resident <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/>	Account Number (for office use)
--	------------------------------------

Type of Account	<input type="checkbox"/> Cash Certificate	<input type="checkbox"/> Fixed Deposit	<input type="checkbox"/> Recurring Deposit	<input type="checkbox"/> Tax Saver Deposit	<input type="checkbox"/>
------------------------	---	--	--	--	--------------------------------

	Name	Account Number (Operative)	Customer ID			
Primary Applicant						
Second Applicant						
Third Applicant						
Mode of Operation	<input type="checkbox"/> Single	<input type="checkbox"/> E or S	<input type="checkbox"/> Joint	<input type="checkbox"/> F or S	<input type="checkbox"/> L or S / A or S	<input type="checkbox"/> Minor A/C operated by guardian

Deposit Amount/ Installment Amount (Applicable for RD)	Period	Interest Rate (for office use)	Payment Value/ Interest/Maturity Proceeds Credit A/C
			Payment Value/ Interest Payment Mode : MLY <input type="checkbox"/> QLY <input type="checkbox"/> <input type="checkbox"/>
			(applicable for Annuity/ FD) CURRENCY (for FCNR Deposits):

Auto Renewal facility on Due Date is enabled by default (For KYC updated accounts only) Please specify, if you dont wish to avail this facility.....	Renewal Instructions	Renew Deposit on Due Date for..... <input type="text" value="Enter Period"/>
--	-----------------------------	--

ADDITIONAL DETAILS FOR RECURRING DEPOSITS Periodicity of Installment for Recurring Deposit: Standing Instruction: Kindly Debit my A/c No. in tune with RD amount, periodicity and period. ADDITIONAL DETAILS FOR SECURITY/ EARNEST MONEY DEPOSITS a. Purpose of the deposit: b. Under whose orders the security is releasable: c. To whom the deposit amount is repayable after release:	MATURITY PROCEEDS - OTHER BANK DETAILS (Only for Tax Saver Deposits) Mobile No./ Email ID Account Number Account Name IFSC Code Bank Name Branch Name/ Address
---	---



Term Deposits can be opened online through
our Mobile Banking application - FedMobile &
Internet Banking - FedNet!

Explore our world of Mobile/ Internet Banking
at your fingertips!



DEBIT AUTHORISATION

Branch Name

Date.....

I/We hereby authorise The Federal Bank Ltd to debit Rs (In words:
.....) from my Account No.....for
opening this Term Deposit in the name of
Term Deposit Account Number:.....

Entered by

Authorised by

SIGNATURE

*This part of the form is for internal use and this is to be filed with the day's vouchers

Declaration cum Authorisation:

I/We am/are aware that the premature withdrawal of Deposit(s) will require consent and signature of all the Depositor(s) irrespective of the mode of operation. *I/We hereby authorize the Bank that in event of death of anyone or more of the Depositor(s), the Bank on receipt of written request from the surviving Depositor(s), as per the mode of operation, will allow the surviving Depositor(s) to prematurely withdraw the term deposit without seeking concurrence from the legal heirs of the deceased depositor(s) (*Not applicable for accounts with mode of operation "Joint"). I/We am/are aware that Term Deposit booked under "Premature Withdrawal not allowed" option cannot be withdrawn till maturity. I/We further declare and confirm that any modification to the above authorization/mandate shall be only by way of joint instructions by all the applicants/joint holders. I/We am/are aware that, premature closure penalty is applicable for all rupee term deposits except bespoke deposit(s), as per the applicable terms and conditions of the Bank. I/We have been informed about the applicable penal interest rate for premature withdrawal. The calculation of interest for deposits booked in a year is "365 days basis" (even during a leap year). I/We understand that the bank may at its absolute discretion, discontinue any of its services completely or partially without any notice to me/us. I/We agree that the bank may debit my/our account for service charges as applicable from time to time. I/We understand and agree that I/We would not be eligible to get any interest if my/our NRE/ FCNR deposit account/s is closed prematurely before completing 1 year.** I/We understand that the Bank may at any time and without notice to me/us combine and consolidate all or any of my/any one or more of our accounts and set off or transfer any sum standing to the credit of my/our account in or towards the satisfaction of any of my/ any one or more of our liabilities to the Bank or any other account or in any other respect whether such liabilities be actual or contingent, primary or collateral or joint or several (**Not Applicable to Security/ Earnest Money Deposits). I/We agree that overdue interest for defaulted installments will be deducted from the maturity proceeds in the case of recurring deposits. I/We have read & understood the terms and condition governing the opening of an account with The Federal Bank Ltd. and those relating to various services including term deposit(s). I/We accept and agree to be bound by the said Terms and Conditions including those limiting/excluding the Bank liability. I/We accept and agree to be bound by the Terms and Conditions related to Term Deposits provided in the website www.federalbank.co.in. I/We am/are aware that the term of tax savings deposit is five years commencing from the date of opening the deposit and premature withdrawal is not allowed. I/We am/are aware that the auto renewal/renewal facility is not available on Tax savings deposits/Deposit plus accounts and the proceeds will be transferred to the operative account upon maturity. I/We am/are aware that RTGS/NEFT charges will be deducted from the maturity amount in all applicable cases. I/We am/are aware that premature withdrawal is not allowed for Annuity linked deposit and Deposit plus accounts. I/We am/are aware that in the case of Annuity linked deposit scheme, the opted Payment Value comprises of a part of the Principal Deposit amount along with interest at applicable rate. The interest for Annuity linked deposits will be calculated at quarterly compounding rests on the diminishing principal amount. I/We understand that if required KYC formalities are not complied with by any of the deposit holder(s), Bank may at its sole discretion discontinue the auto-renewal of the term deposit. I/We also understand that, back dated opening of term deposits is not permitted and no deviation shall be allowed in this regard under any circumstances. I/We hereby declare that the information furnished above is true & correct to the best of my/our knowledge.

PLACE :			
DATE :	Signature (Primary Applicant)	Signature (Second Applicant)	Signature (Third Applicant)

For Office use only: A/C opened and instructions noted.		
Clerk	Asst. Manager	Manager/Senior Manager/ AVP

Form DA 1

**Nomination under Section 45'ZA' of the Banking Regulation Act
1949 and Rule 2(1) of the Banking Companies (Nomination) Rules, 1985 In respect of bank deposits**

I/We.....
(Name/s and address/es) nominate the following person to whom in the event of my/our/minor's death the amount of the deposit, particulars where of are given below, may be returned by the **The Federal Bank Ltd., Branch**.....

Deposit		
Nature of deposit	Distinguishing No.	Additional details, if any

Nominee				
Name	Address	Relationship with depositor if any	Age	If Nominee is a minor, date of birth

As the nominee is a minor on this date, I/We appoint Shri/Smt/Kum.....
.....(name & address) aged.....years to receive the amount of the deposit on behalf of the nominee in the event of my / our/minor's death during the minority of the nominee.

Place:.....
Date : Name(s), signature(s) and Address(es) of witness(es) *Signature(s) / Thumb Impression(s) of the depositor(s)

The Bank official/representative have briefed me/us about the advantages of nomination and requested to fill nominee details. After considering Bank's request I/we have decided not to provide the nomination and demand that the Bank should open my/our account/s without nomination.

Place:.....
Date : *Signature(s) / Thumb Impression(s) of the depositor(s)

Note: * Where deposit is made in the name of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor & strike out if nominee is not a minor. @ Thumb impression(s) shall be attested by two witnesses



ACKNOWLEDGEMENT (NOMINATION)

Branch.....
Date.....
Appl. No.....

To,
Shri/Smt.....
Dear Sir/Madam,
Reg: Nomination in respect of your deposit No.....with us
Ref: Your Application Form DA1/ Letter No.....dated.....
We acknowledge receipt of your letter of nomination dated.....authorizing Shri/ Smt.....
to receive the amount of the aforesaid deposit kept in A/c No.....with us.

Yours Faithfully