

# TERM DEPOSIT/SCHEME ACCOUNT OPENING FORM

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

Date

Manager  
The City Bank Limited  
Islamic Banking Branch

Relationship Branch Name Seal

**For Bank Use Only**

Unique Customer ID

A/C No.

Dear 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**

Islamic Term Deposit       Islamic Hajj Deposit       Others  (Please Specify)

Islamic Monthly Benefit Scheme       Islamic Monthly Deposit Scheme       Others  (Please Specify)

**Nature of Account**

Individual       Joint       Non - Individual

## TERM DEPOSIT INFORMARTION

**Currency**    **Amount**           **Customer's ISR**   .   %

**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       Renew principal only and credit profit to the Account No.   
(If Yes, Please select any 1 option)       Renew both principal and profit

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 profit for the period as per banks on the maturity date at the prevailing rate of profit.

## SCHEME INFORMATION

**Name of Scheme**  **Period of Scheme**    Months

**Amount per Installment**           **Amount in Words**

**Frequency of Installment**           **Installment start date**

**Expected Payable Amount in Words**           **Expected Payable at Maturity (In words)**

**Debit Instruction**  Please Debit My/Our Account No.  **Customer's ISR**   .   %

## NOMINATION DETAILS

New Nominee Assignment: Please fill out the "Nominee Assignment Form"      Nominee Details & Photograph Checked by

Same as Operative Account No.

No. of Nominee

CS Signature & Seal with Date

## 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

<b>Name of the Minor Applicant (s)</b>	1 <input style="width: 100%;" type="text"/>	2 <input style="width: 100%;" type="text"/>	3 <input style="width: 100%;" type="text"/>																								
<b>Date of Birth of Minor</b>	1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	2 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	3 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
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D	D	M	M	Y	Y	Y	Y																				
D	D	M	M	Y	Y	Y	Y																				
<b>Name of the Guardian (s)</b>	1 <input style="width: 100%;" type="text"/>	2 <input style="width: 100%;" type="text"/>	3 <input style="width: 100%;" type="text"/>																								
<b>Relationship with the Minor</b>	1 <input style="width: 100%;" type="text"/>	2 <input style="width: 100%;" type="text"/>	3 <input style="width: 100%;" 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, Profit Rates for Fixed Deposit/Scheme Accounts as may be revised/amended by The City Bank Limited ("the Bank") from time to time and should be considered as an integral part of the Terms and Conditions for Account (as amended from time to time) unless otherwise expressly set out herein. The details about the account(s), operation and maintenance of the account(s), periods, profit 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 the 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(s) maintained with the Bank for crediting into the Fixed Deposit/Scheme Account(s). For Scheme 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 profit shall be payable provided that the Bank shall always have the option to pay profit in respect of such account(s) 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 is supposed to be credited, the Bank shall be entitled without demand or notice, at its discretion, to terminate the Account or convert the same into a savings or other type of account. The Bank reserves the right to impose a fee under such circumstances. For the avoidance of doubt, no profit shall be payable in respect of the balance in the account provided that the Bank shall always have the option to profit 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 to be considered as 'Receipt'. It is only the evidence of deposit and not a document of title and is not transferable. 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/Scheme 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/Scheme Account.

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

1st Applicant Signature	2nd Applicant Signature	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 Regulatory

SBS Code	<input style="width: 100%;" type="text"/>	Deposit Type Code	<input style="width: 100%;" type="text"/>								
Name of DSE/ Branch Employee	<input style="width: 100%;" type="text"/>		RM/Employee Code <input style="width: 100%;" type="text"/>								
Monitoring RM	<input style="width: 100%;" type="text"/>		Monitoring RM Code <input style="width: 100%;" type="text"/>								
Tax Applicable <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> E-TIN Exists <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> E-TIN Documents submitted, where applicable	<input type="checkbox"/> No <input type="checkbox"/> Tax Waiver Documents submitted, where applicable									
A/C Occupation Code	<input style="width: 100%;" type="text"/>	Scheme Product Code	<input style="width: 100%;" type="text"/>								
Branch SOL	<input style="width: 100%;" type="text"/>	Term Deposit Product Code	<input style="width: 100%;" type="text"/>								
Value Date	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr></table>			D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y				
Comment	<input style="width: 100%;" type="text"/>										

Signature with Name Seal & Date Account Opened by	Signature with Name Seal & Date Recommended by (BOM)	Signature with Name Seal & Date Approved by BM/Designated Officer
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