

FIXED DEPOSIT/RECURRING DEPOSIT LIQUIDATION FORM



Please fill in Black Ink & in CAPITAL LETTERS only

Date
D D M M Y Y Y Y

CUSTOMER DETAILS

Name of Primary Applicant/Authorised Signatory 1

Name of Second Applicant/Authorised Signatory 2 (if any)

Name of Third Applicant/Authorised Signatory 3 (if any)

FIXED DEPOSIT

I/We request you to please liquidate the below mentioned Fixed Deposit held in my/our name as per instructions below

Fixed Deposit Account Number Principal Amount ₹

Liquidate the entire Deposit amount

Liquidate a part of the Deposit for an Amount of ₹ on
D D M M Y Y Y Y

The remaining amount will continue as an Fixed Deposit at the contracted rate. This facility is not available for Fixed Deposits with Principal Amount greater than Rs. 1 Cr

Proceeds will be credited to IDFC FIRST Account Number

Proceeds will be credited to alternative account number through Funds Transfer

Bank Name

Account Name

Account Type IFSC Code

RECURRING DEPOSIT

I/We request you to please close the below mentioned Recurring Deposit held in my/our name as per instructions below

Recurring Deposit Account

Proceeds will be credited to IDFC FIRST Account Number

DECLARATION & SIGNATURE(S)

I/We hereby undertake to abide by the General Terms and Conditions and Schedule of Charges as available on our website www.idfcfirstbank.com

Sign as per Account Rule

Signature

Signature

Signature

Name of First Account Holder/
Authorised Signature

Name of Second Account Holder/
Authorised Signature

Name of Third Account Holder/
Authorised Signature

FOR BANK USE ONLY

Service Request No.

Employee ID

Name of the Branch Official

Sourcing Branch Code

Signature of the Branch Official

