Gift City Fixed Deposit Form

Either or Survivor



Application Date Date		
Application Date Date Please fill in Black Ink & in CAPITAL LETTERS only Application Date Date Date Date Date Date Date Date		
CUSTOMER INFORMATION		
Name of Primary Applicant		
Customer ID		
Name of Second Applicant (if any)		
Customer ID		
Name of Third Applicant (if any) Customer ID		
 Please update PAN if not done yet. Please fill a PAN update form or update it through internet banking. If you do not have a PAN please complete a Form 60 available on www.idfcfirstbank.com 		
FIXED DEPOSIT INSTRUCTIONS		
Type of Deposit Gift City Fixed Deposit		
Amount USD EURO Note: The currency for the Fixed Deposit should be same as the currency for FIRST Global Saving Account.		
Note: The darking for the Fixed Deposit chedid be sufficiently for Fixed Caving Account.		
Funding Instruction Debit to Global Saving Account:(Mention Global Saving Account number)		
Tenure (in days) Years Months Days		
Note: Gift City Fixed Deposit can be booked for minimum 7 days and maximum 60 months		
Interest Rate%		
Interest Mandate Interest earned on your deposits is re-invested and paid on maturity along with your principal.		
Maturity Instruction For all Gift City Deposit Principal & Interest will be renewed for a similar tenure. Renew Principal & Interest (if any) Payout, do not renew		
 Maturity and Interest proceeds for the Gift City Deposits will be credited to the FIRST Global Saving Account from which Deposit has been created No interest shall be paid if Gift City Fixed Deposit is closed within 7 days from the date of creation of the deposit Interest paid, if any for Gift City simple interest Fixed Deposit will be recovered from principal before such premature closures For Gift City Fixed Deposits, please share bank details for payout separately. 		
MODE OF OPERATION		



IBU Gift City

WOULD YOU LIKE TO CHOOSE A NO	MINEE FOR THE ACCOUNT?		
(Nomination under Section 45 ZA of the Banking Regulations Act, 1949 and Rule 2(1) of the Bai The Nominee or Guardian (if applicable) cannot be a holder on the account. Yes, I want to nominate the following person to whom in the event of my/our death the IDFC FIRST Bank, IBU Gift City Branch			
No, I do not wish to nominate anyone on my behalf at this moment. I und nominating anyone to my account	lerstand the advantages of nomination and the consequences of not		
	nt holder, don't fill address)		
Nominee Name			
TITLE FIRST NAME MIDDLE NAME	LAST NAME		
Nominee Address Same as primary account holder communica	tion address Update address as below		
If the nominee is a minor**, please complete this section. As the nom			
Relationship with Depositor	Date of Birth		
TITLE FIRST NAME MIDDLE NAME	LAST NAME		
Guardian Address			
to receive the amount of deposits in the account on behalf of the	ş. ,		
minority of the nominee. (** Where deposit is made in the name of a minor the nomine Please mention the nominee name in the statement/advice/pass			
I/We do hereby declare what is stated above is true to the best of my	y knowledge and belief.		
Date DD MM YYYY Place			
DECLARATION (Please read carefully a	nd sign at the and of this section)		
1. I/We will be bound by the Terms and Conditions detailed in this Deposit Application Form and understand that the same are in addition to the Terms and Conditions provided to me/us at the time of initial account opening. I/We also understand that the Terms and Conditions may be amended from time to time at the sole discretion of the bank and that the current Terms and Conditions are available at www.idfcfirstbank.com 2. For accounts with method of Mode of operation "either or survivor": I/We authorize IDFC FIRST Bank, IBU Gift City branch to execute pre-mature withdrawals on my deposits placed and/or proposed to be placed, based on the instructions from any one of account holders on the deposit account subject to the terms and conditions provided to me/ us by IDFC FIRST Bank, IBU Gift City Branch.			
 In the absence of any special instructions, the deposit will be renewed on maturity for a like term at the their Rates up to 180 days are on "simple interest" basis. Interest on tenor above 180 days is payable/compounded on quarter such that interest is paid on the interest earned in the previous quarters as well. Name of Applicant (i) Name of Applicant (ii)			
Tellie 677 ppiredit (I)	Training of Applicant (III)		
Signature Signature WITNESS 1 (Required only if nomination forn any of the applicants use thu	n has been filled and (Required only if nomination form has been filled and		
Date of Application:			
BANK USI	E		
FD Product Code FD	Number		
Branch Code 42345 Branch Name IBU Gift City Branch	Sourcing Branch Code		
Lead Generator Lead War	mer Code		
Lead Convertor Code Business Division/Segment Code Campaign Code			
Cumpuigh code			
DECLARATI	ON		
Customer Signed in my Presence	Employee ID		
Request received from registered email id of customer and Banker on Call verification done	Епіріоуее ід		
Name	Signature		
Date			