



(Subsidiary of Central Bank of India)

सेन्ट बैंक ऑफ इण्डिया बिल्डिंग, 9, अरेरा हिल्स, भोपाल-462 011 Central Bank of India Building, 9, Arera Hills, Bhopal-462 011

**APPLICATION FOR FIXED DEPOSIT**

(To be filled by the depositor-use block letter-Tick the Box Whenever applicable)

A) Quaterly Income Scheme  Monthly Income Scheme  Cumulative Deposit

B) Period 12 15 18 21 24 27 30 33 36 39 42 45 48 51 54 57 60 63 66 69 72 75 78 81 84 87 90 93 96 99 102 105 106 111 114 117 120 Month

C) First Applicant Name Mr/Ms .....  
Address ..... Signature .....  
E-mail ..... Mobile ..... Tel. No. ....

D) Second Applicant Name Mr/Ms .....  
Address ..... Signature .....

E) Third Applicant Name Mr/Ms .....  
Address ..... Signature .....

F) Parents of Guardian Name (In case of 1st Applicant is Minor) .....  
Address ..... Signature .....

G) Senior Citizen (above 60 years) Yes  No

H) Amount of Deposit Rs. .... (Rupees) ..... Dated .....  
Paid Cash/Cheque/Demand Draft No. .... Branch .....  
Bank .....

I) If Renewed, Certificate No. .... dated ..... Amount Rs. .... By addition Rs. .... By Cheque/DD No. ....  
Bank ..... or By Receiving Rs. ....

J) Tax to be deducted: Yes  No   
(if no, please submit Form 15G/15H) Order u/s 159  Notification u/s 10

K) Deposit payable to: a) 1st Applicant  b) Either or Survivor  c) Any one or Survivor  d) All jointly

L) Status: 1) Resident Individual  2) HUF  3) Trust  4) Co-operative Society  5) Association of Person   
6) Staff  7) Domestic Company  8) NRI  9) Others

M) Occupation of First Applicant 1) Service  2) House Wife  3) Business   
4) Professional  5) Retired  6) Student  7) Others

N) Mandatory Identity Proof & address proof 1st depository only (enclose photo copies of both) (self-attested)  
IT/PAN No. .... Election ID .....  
Passport No. .... Ration Card/Driving Licence .....  
Or any other proof to the satisfaction of the company (such as electricity bill, telephone bill etc.)

O) Particulars of other Deposits ..... Amount Rs. ....

P)	Bank Details	Details	1st Depositor	2nd Depositor	3rd Depositor
		Name			
		A/c No.			
		Type of A/c			
		Bank Name			
		Branch			
		IFSC Code			

Q) Nominee Form (Optional)  
I/We ..... nominate the following person to whom in the event of my/our/minor's death, the amount of the deposit, particulars where off are given, may be paid by the Company.  
Name of the Nominee Mr./Ms .....  
Address ..... Tel. No. .... Mob .....  
Age ..... Relationship ..... Date of Birth (if Nominee is Minor) ..... as the nominee is minor on this date I/We appoint Mr./Ms ..... (name, address, age) 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.

R) Declaration (a) I/We have read and understood and agree to abide by the stipulated terms & conditions. I/We declare that the first name /mentioned depositor in our application is the beneficial owner of the deposit and as such he/she should be treated as the payee for the purpose of deduction of Tax under 194A of the Income Tax Act, 1961. I/We declare that this deposit does not represent fund borrowed or deposit from third parties.  
(b) I/We have gone through the financial and other statement/particulars/representations furnished/made by the Company and after careful consideration I am making the deposit with the Cent Bank Home Finance Limited Company at my own risk and volition.  
(c) I/We declare that I/we am/are authorised to make this deposit in the above mentioned scheme (CBHFL Deposit) and that the amount kept in the deposit is through legitimate source and does not involve directly or indirectly any proceeds of schedule of offence and/or is not designed for the purpose of any contravention or evasion of the provisions of the prevention of Money Laundering Act, 2002 and any Rules, Regulations, Notifications, Guidelines or directions there under, as amended from time to time. I/We shall provided any further information and fully cooperate in any investigation as and when required by the company in accordance to the applicable law. We further affirm that the information/details provided by us are true and correct in all respect, no part thereof is false and nothing has been concealed.  
(d) I hereby give my explicit consent to the Housing Finance Company to duly renew principal/renew principal and interest, pay in entirety, the principal and interest to my designated Bank Account mentioned herein on maturity of the deposit.

S) Signature of Applicant(s)  
i) ..... ii) ..... iii) .....  
Date: ..... Place: .....  
In case of Non Individual Depositor (Please furnish the following information)  
Name of Authorised Signatories Designation Specimen Signature (s)  
i) .....  
ii) .....  
iii) .....

**FOR OFFICE USE ONLY**

New Deposit		Renewal							
FDR/CDR Printed No.	Date of receipt	Effective Date of Deposit	Maturity Date	Rate of Intt. %	Maturity Value in CD	FDR/CDR No.	Voucher No. & Date	Authorised Signatory	

**ACKNOWLEDGEMENT**

Received Cheque No. / DD No. / Cash ..... Rupees .....  
for deposit of ..... years/months

