Date:

The Manager,
Shinhan Bank,
Branch

Subject: - Request for a Term Deposit – CIF ID _____

Dear Sir,

I/We would like to place a term deposit as under:

Amount: (In Figures)	
Amount: (In Words)	
Starting Date	
Tenor	[] Year [] Days [-] Month @% (Simple Interest Method)

I/We authorize you to Debit my/our Current Account No. - _____

Term Deposit Closure Instructions (please tick any one of the four options)

Credit to my/our Savings/Current A/c No		on maturity.
Renew on maturity with / without interest for a period of		days at prevailing rate.
Auto renewal at prevailing rate.		
RTGS/NEFT transfer to other bank:		
A/c Name		
A/c Number		
Beneficiary Bank & Branch		
IFSC Code	-	

I/We Understand that:

- TDS will be deducted at applicable rates. If no TDS to be deducted then 15G/15H (as applicable) will have to be submitted, in absence of which the TDS will be deducted.
- Nomination facility is available with the Bank and form 45ZA has to be filled for the aforesaid purpose.
- No partial withdrawals are allowed in the fixed deposit special schemes, if any.
- The partial withdrawals / Premature Withdrawal / Closure before maturity date are allowed for Fixed Deposits up to ₹40 crores without any penalty.
- The Fixed Deposits booked for ₹40 crores and above, when Partial Withdrawal/Premature/Closure Before Maturity Date shall attract penalty of 1% on applicable bank rates, for which the fixed deposit has remained with the bank or contracted rate whichever is lower.
- I/We have read and understood the terms and conditions of placing the Fixed Deposit as given in the Customer Service and Deposit Policy of the bank which is displayed on the website of the bank.

For ______

(Customer/Company Name)

Individual Customer/Authorized Signatories (Company Stamp in case of Non-Individual)