ज्योति विकास बैंक लि.
JYOTI BIKASH BANK LTD.
More than a Bank

_____Branch Date :_____

APPLICATION FOR FIXED DEPOSIT

I/We hereby request you to issue a Fixed Deposit in my / our name as per the following details.

NAME:.....

ADDRESS:.....

	Cur	Amount
Amount in figures		

Period:.....

Amount in words:.....

.....

Interest to be paid to:

NAME:.....

Account No.: | | | | | | | | | | | | | | | |

Payment Details

☐ Enclosed Cash/Cheque

☐ Other (specify)_____

_____
Signature of Applicant(s)

FOR BANK'S USE ONLY

Date :_____

Account No.: | | | | | | | | | | | | | | | |

A/C Name: .....

Dr : Cash/Cheque/Others.....

Value Date :.....

Maturity Date :.....

Interest Rate :.....

Tax Taxable ☐ Non-taxable ☐

_____
Prepared by

_____
Entered by

_____
Approved by

JB/CS10