

**Term Deposits -
Change in Maturity Instructions**

Date: _____

Customer ID No.

--

To,
The Branch Head
_____ Branch

Dear Sir,

Please update / change maturity instructions of my / our Term Deposits with you:

Name(s) _____

Account Number(s) _____

Revised Maturity Instructions:

- Renew Principal and Interest for _____ days _____ months _____ years
- Renew Principal only for _____ days _____ months _____ years
- Pay Interest by credit to A/c No. _____ or by Pay Order / Demand Draft on _____ (city).
- Credit Principal and Interest to A/c No. _____ or by Pay Order / Demand Draft on _____ city).
- Any Other Instructions _____

I am / We are aware that the existing Deposit Confirmation Advice(s) would be replaced with the revised Deposit Confirmation Advice(s) to be issued to me based on the above revision of maturity instructions.

Contact Details: Landline No. _____ Mobile No. _____

Signature(s) – to be signed by all the joint account holders

FOR OFFICE USE ONLY

Signature(s) Verified by	
System Updated by	


Date: _____ Signature(s) of Bank Officials

Acknowledgement

Name	Cust ID
------	---------

Received Customer Request for Change in Maturity Instructions of Term Deposits in A/c No(s). _____

Signature & Date Receipt Stamp

 **DCB 24-Hour Customer Care**
Email customercare@dcbbank.com
Call 3281 1322 ■ Toll Free 1800 209 5363
Website www.dcbbank.com