

FIXED DEPOSIT SERVICES FORM
The Manager
The National Bank of Ras Al-Khaimah
Date _____

(Branch)
 Name(s) _____
 FD Account No. _____ Due on ____/____/____
 Amount /CCY _____

Pre Mature Withdrawal/Maturity/Amendment Instruction

- Please uplift my Fixed Deposit prematurely on ____/____/____ and credit proceeds to my/our account number _____
- Partially uplift _____ / _____ (Amount/CCY) from my deposit prematurely on ____/____/____ and credit proceeds to my/our account number _____
- On renewal partially uplift/decrease _____ / _____ (Amount/CCY) from my deposit and credit proceeds to my/our account number _____
- Cancel the Rollover existing on the Deposit; on maturity of the deposit credit the proceeds to my account number _____
- On next Rollover change the rollover frequency of the deposit to ____ years ____ months ____ days
- On Rollover increase the deposit by _____ / ____ (Amt/CCY) by debiting my/our account number _____ / _____ (Account Number/ CCY). Applicable to the next rollover only
- On Rollover/Renewal increase the deposit by ____ / ____ (Amt/CCY) from my/our account number _____ / ____ (Account Number/CCY) and apply the same to all subsequent rollovers unless otherwise instructed by me/us
- Cancel the instruction to Rollover the Deposit with Additional Amount
- On maturity remit the principal plus interest by TT/ Draft/ Manager's Cheque (Remittance Application attached)

Account Details Amendment Instruction

- Please amend my Interest Credit/Repayment Account to _____ / ____ (Account Number/CCY)

Any other Instruction: Please specify _____

Customer's Signature / Authorised Signatory

Signature Verified
FOR BANK USE

Funds Checked: Yes/No Rate agreed: Yes/No Under Lien: Yes/No CSO/DSA Code: _____
 CSM/MMCSO/BM _____ CIF ID 1 _____ CIF ID 2 _____ CIF ID 3 _____