FCNR (B) DEPOSIT – MODIFICATION REQUEST



Date of Application:	Home	Branch	Branch Code
Deposit Account No:			
First Applicant:	Name:	U	CIC:
Second Applicant	Name:	U	CIC:
Third Applicant:	Name:	U	CIC:
Change in Maturity	Instructions:		
Please change the M	laturity Instructions for th	e above-mentioned FCNR (B) Te	erm Deposit/s as below
	cipal and Interest cipal and Redeem Interes w	st	
Change in Maturity	Account No:		
Please change the d	etails of Account to Inte	erest / Maturity Payout is credite	ed to
a) Credit to my/o	ur ESFB Account No. N	IRE / NRO :	
	(OR)		
b) Credit to my o	ther Bank Account		
Account No.:			
Pank Nama:			
IFSC Code:			
`	elled cheque leaf of other (OR)	bank account)	
c) kindly fill repatriati	on / overseas beneficiar	y updation form for outward remi	ttance
Declaration:			
said Terms and Con	ditions including those ex	cluding/ limiting the Bank's liabili	n. I/we accept and agree to be bound by the ty. I/We understand and agree that the Bank etely or partially without any prior notice to
declare and confirm all the applicants/ jo	that any modification to int holders. I/We are awa	the above authorization/mandate are the above-mentioned modific	s applicable from time to time. I/We further shall be only by way of joint instructions by ations can be effected only prior to maturity we is true and correct to the best of my/our
Name and Signature	e of Applicants:		
First Ar	oplicant Name	Second Applicant Name:	Third Applicant Name:

NR DEPOSIT MAY 25