REQUEST FOR PRECLOSURE OF FCNR (B) DEPOSIT

Date of Application: ☐☐☐☐☐☐☐☐ Home Branch _____ Branch Code _____

Deposit Account No: _____ Maturity Date: _____

First Applicant: Name: _____ UCIC: _____

Second Applicant Name: _____ UCIC: _____

Third Applicant: Name: _____ UCIC: _____

Instruction for Proceeds:

Payout credited to:

a) ☐ Credit to my/our ESFB Account No. NRE / NRO : _____

(OR)

b) ☐ Credit to my other Bank Account

Account No: _____

Bank Name: _____

Branch Name: _____

IFSC Code : _____

(cancelled cheque leaf of the above account is enclosed)

(OR)

c) repatriation / overseas beneficiary updation form for outward remittance

Declaration:

I / We have read, understood and agree to abide by the terms and conditions applicable for foreclosure/premature closure of above said my / our deposit, as may be in force from time to time. The rate of interest applicable, in case of premature withdrawal of FCNR (B), shall be 1% lower than the contracted rate of interest or the rate of interest applicable for the completed anniversary of the FCNR(B) deposit, prevailing at the time of placing of the deposit, whichever is lower. I/ we also agree that payment of interest on my / our deposit may be allowed in accordance with the conditions applicable to premature closure/withdrawal of the FCNR (B) deposit, as laid down by the Reserve Bank of India /Equitas small Finance Bank in this regard.

Name and Signature of Applicants:

Signature

First Applicant Name	Second Applicant Name:	Third Applicant Name:
_____	_____	_____