



ብርሃን ባንክ አ.ማ.
Berhan Bank S.C.

Branch _____

Date _____

APPLICATION FORM FOR FIXED TERM DEPOSIT

Name: _____

Date of Birth: Date _____ Month _____

Address: City/Town _____ Sub City _____ Kebele _____ House No _____

P.O Box _____ Home Tel. No _____ Office Tel. No _____

I.D Card No. _____ Issued by _____ Date Issued _____

Amount to be deposited _____

1. I, Whose name and address are stated above hereby apply to deposit Birr _____

for _____ months/ Years under the terms and conditions stipulated on the back page of the deposit certificate and those that the Bank may issue in future.

2. I, further agree and instruct the bank to pay me interest on the deposited amount in the following manner. (Indicate your choice by using the mark())

☐ Add the interest to the principal and renew the deposit under the same condition and for a similar period.

☐ Credit my account No. _____ with _____ Branch

☐ Deposit in non-interest bearing account to be paid to me in cash upon my request.

Applicant's Signature _____

Processed by _____ (Full Name And Signature of Bank's Staff)

Certificate No. _____

Remarks _____