RBS
The Royal Bank of Scotland

CUSTOMER REQUEST FORM - For Individuals
To be filled in by customer in CAPITAL LETTERS ONLY

To,

Date: D D M M Y Y Y Y

The Branch Service Manager

_____ Branch

I/ We request you to process the following as indicated below with reference to

Account Number* _____ / Customer Relationship No.(CRN) _____

Customer's Name (as in the account) _____

Note: Please fill complete details and provide signature in the designated section on this form.
*** Indicates a mandatory Field**

FIXED DEPOSIT

Existing Fixed Deposit Number: _____

Maturity Date: D D M M Y Y Y Y

Changes in Maturity Instructions **(please refer point no. 7 under Important points to note)

- ☐ Credit interest into my RBS account no_____
- ☐ Pay interest as Demand Draft and send to mailing address on records
- ☐ Credit principal amount into my RBS account no _____
- ☐ Pay principal amount as Demand Draft and send to mailing address on records

Premature Closure of Fixed Deposit (Imp – Please strike off this portion, if not selected)

- ☐ Close my Fixed Deposit number _____ in full; and
- ☐ Issue me a Demand Draft and send to mailing address on records , OR
- ☐ Credit into RBS account no _____

Tax Related

- ☐ Update Form 15 G/15 H for FD no_____
- ☐ Enclosed ☐ Form 15 G ☐ Form 15 H

STATEMENT

Issue a statement of transaction account/loan account from

D D M M Y Y Y Y to D D M M Y Y Y Y

Change Statement frequency to

☐ Annual ☐ Half Yearly ☐ Quarterly ☐ Monthly

PASS BOOK

- ☐ Issue a Passbook

CHEQUE BOOK

- ☐ Issue cheque book(s)_____

STOP PAYMENT

- ☐ Place stop payment on cheque no _____
  Payee_____ Reason _____
- ☐ Place stop payment on cheque no(s) _____
  Reason _____
- ☐ Revoke stop payment from cheque no(s) _____
  Payee_____ Reason _____

This document is subject to the T&Cs governing the Account(s) and policies of the bank in force, as on date.

CERTIFICATE(S)

- ☐ Issue Fixed deposit advice for FD No_____
- ☐ Issue Balance confirmation certificate as on _____
- ☐ Issue Account Maintenance certificate
- ☐ Issue Interest certificate for the financial year _____
- ☐ Issue duplicate TDS certificate for the financial year(s) _____ , _____
- ☐ Issue Service Tax, Charge Debit Advise for month(s) _____
- ☐ Provide the transaction / debit advice for transaction dated_____
  Amount _____ Cheque no _____
  Copy of RBS cheque required ☐ Yes ☐ No

Note - if you have selected yes, the copy of the cheque will be couriered to you

STATIC DATA UPDATION/ CHANGE

- ☐ Update my Mother's Maiden name as _____
- ☐ Update my Passport number as - _____
  (A copy of the Passport needs to be submitted as proof at branch)
- ☐ Update my PAN as _____
  (A self attested copy of the PAN card needs to be submitted as proof at branch)
- ☐ Update my Aadhar Card/UID number _____
  (A self attested copy of the Aadhar Card needs to be submitted as proof at branch)
- ☐ Update my Date of Birth as _____
- ☐ Type of document attached to support the Date of Birth
  ☐ Passport ☐ Driving License ☐ PAN ☐ Others (Please specify) _____

IMPORTANT POINTS TO NOTE

1. Please provide your signatures as per Bank records
2. Joint account holders needs to sign as per the mandate
3. Please strike off the portion that is not relevant to your request
4. Any alteration in the form needs to be counter signed
5. Charges, if applicable will be as per Schedule of Benefits. Refer to our website www.rbs.in for updated schedule
6. Request will be processed only on receipt of complete information and documents
7. Change of deposit instructions can be accepted only **7** days prior to maturity date **
8. Upon issuance of new passbook, only transactions post issuance /reissuance date will be printed in the passbook

_____	_____	_____
SIGNATURE OF CUSTOMER	**SIGNATURE OF CUSTOMER**	**SIGNATURE OF CUSTOMER**
(CRN) _____	(CRN) _____	(CRN) _____

For Bank use

Name of the receiver: _____ Employee id: _____ Received on: D D M M Y Y Y Y

Actioned by: _____ on date: D D M M Y Y Y Y Signature: _____

Documents received and attached: (1) _____ (2) _____

(3) _____ (4)_____

CRF1_JAN_2017

ACKNOWLEDGEMENT

Date: _____

Received from (Name of A/C holder) _____ _____ Account number _____

Request for _____ Ref no. (if applicable) _____

Documents received and attached:(1) _____ (2) _____

(3) _____ (4) _____

Signature of receiving officer_____

Name _____ RBS branch _____

BANK BY PHONE

Mumbai: 022-6627 1111 Toll free#: 1800 11 2224