ADDITIONAL DEPOSIT FORM Please use this form for additional deposits to be opened in an existing account	
NEW ACCOUNT DESRIED TO BE OPEN	
SHORT TERM DEPOSIT FIXED DEPOSIT RECURRING DEPOSIT	
Customer ID:	
Account Number:	
Please Fixed Amount in figures:	
Amount in words:	
At the agreed rate of interest of% p.a	
For a period of Days/Months/Year effective from date //	
FULL NAMES:	-
1 st Applicant:	
2 nd Applicant:	
3 rd Applicant:	
Mode of Depositing Funds: Cash ChequeNo Transfer	
Payment on Maturity: Credit my/our Account:	
Auto Renewal:	
I authorize the Bank to automatically renew the deposit with accrued interest for the same period on maturity date at the prevailing rate of interest unless otherwise informed by me. Renew Principal only Renew Principal + Interest Maturity Amount + Additional	
AGREEMENT/ DECLARATION:	
 I/We have read and understood the Bank of India (Uganda) Ltd Account's Terms & Conditions from Bank. I/We accept and agree to be bound by the said terms and condition including those excluding limiting your liability. I/We agree that the Bank may debit my/our account for service charges applicable from time to time. By signing below, I/we agree that I/we understand the terms and conditions of this account and agree to be bound by it from time to time. 	
OPERATIONAL INSTRUCTIONS/ACCOUNT MANDATE:	
Self Jointly Either or Survivor Former or Survivor Any one or Survivor Others (Specify):	
SIGNATORIES:	
1 ST Applicant: Name: Signature:	
2 nd Applicant: Name: Signature :	
3 rd Applicant: Name: Signature:	
FOR BANK USE ONLY	
Prepared By: Authorized By: Verified BY:	