


STATE BANK OF INDIA (CALIFORNIA)

APPLICATION FOR RENEWAL OF EXISTING DEPOSITS

DATE: _____

NAME: _____

ADDRESS: _____

 : _____

THE MANAGER
STATE BANK OF INDIA
_____ BRANCH

DEAR SIR,

I/We have the following deposit(s) with you, which are due for maturity. The particulars of the deposit(s) are as under:

1. TDR/STDR a/c no. _____
2. L.F. no. _____
3. PRINCIPAL AMOUNT _____
4. DATE OF ISSUE _____
5. DATE OF MATURITY _____
6. MATURITY AMOUNT _____
7. RENEWAL INSTRUCTIONS: Please renew the deposit(s) for a further period of _____ months/year(s).

() a) Please keep the original receipt(s) with you in safe custody and mail MOS and photocopy to us at the address above.

() b) Please mail the original receipt(s) to us at the address mentioned above.

8. PAYMENT INSTRUCTIONS: Please redeem the deposit on/before due date and wire proceeds to State Bank of India (California), Artesia branch.
9. CHARGES: I/We authorize you to recover \$25.00 towards handling charges from the proceeds payable to me/us in the case of premature withdrawals.

Yours truly,

S.S.No. _____

D.L./I.D.No. _____

Signature

STATE BANK OF INDIA (CALIFORNIA)

APPLICATION FOR CHANGE OF ADDRESS

Date :

Branch:

Name 1.
 2.
 3.
 4.

Old Address:
& Phone No.

New Address:

Phone - Home:

Work:

Safe Custody No(s) / :
Customer No(s) /
Account No(s) /
Receipt No(s)

Signature