

|                                                                                                                                                                                                         |  |                                                                                                    |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------|--|
| CITIZENS DEVELOPMENT BUSINESS FINANCE PLC<br>No. 123, Orabipasha Mawatha Colombo-10<br>Tel : 011 7388388 Fax : 011 2429888 Co. Reg. No. PB232 PQ<br>E-mail : <a href="mailto:cdb@cdb.lk">cdb@cdb.lk</a> |  | <div>CDB</div> <div>FIXED DEPOSIT APPLICATION FORM</div> <div>Date (DD-MM-YYYY) : 19-08-2025</div> |  |
| Type of Deposit                                                                                                                                                                                         |  | Office Use Only                                                                                    |  |
| <div><div>X</div><div>CDB</div><div>සමුදාය</div><div>CDB</div><div>සමුදාය</div><div>Wings</div><div>Other</div></div>                                                                                   |  | Deposit No.                                                                                        |  |
| The Manager CDB<br>Please Open a Fixed deposit account in my / our name/ s By Debit My/Our CDB Savings Account.                                                                                         |  | Receipt Amount                                                                                     |  |
| Expected mode of Transactions / Delivery channels<br>Cash .... Cheque ... Fund Transfer ... All mode of Forms ...                                                                                       |  | Certificate No.                                                                                    |  |
|                                                                                                                                                                                                         |  | Branch                                                                                             |  |
|                                                                                                                                                                                                         |  | Client Code                                                                                        |  |
|                                                                                                                                                                                                         |  | BranchAuthorization                                                                                |  |

|                    |    |
|--------------------|----|
| Name with Initials |    |
| 1.                 | 3. |
| 2.                 | 4. |

|                          |    |
|--------------------------|----|
| Name Denoted by Initials |    |
| 1.                       | 3. |
| 2.                       | 4. |

|                   |    |
|-------------------|----|
| Permanent Address |    |
| 1.                | 3. |
| 2.                | 4. |

|                |    |    |
|----------------|----|----|
| e-mail Address | 1. | 3. |
|                | 2. | 4. |

|                   |     |     |     |     |
|-------------------|-----|-----|-----|-----|
| NIC No.           | (1) | (2) | (3) | (4) |
| Date of Birth (1) | (2) | (3) | (4) |     |
| T.P.No.           | (1) | (2) | (3) | (4) |
| For SMS           | (1) | (2) | (3) | (4) |

|              |     |         |     |         |     |         |     |         |
|--------------|-----|---------|-----|---------|-----|---------|-----|---------|
| Tax Payable  | (1) | Yes/ No | (2) | Yes/ No | (3) | Yes/ No | (4) | Yes/ No |
| Tax File No. |     |         |     |         |     |         |     |         |

|                      |            |
|----------------------|------------|
| Deposit Amount (Rs.) | (in words) |
|                      |            |

|       |    |    |    |    |    |                            |             |         |        |               |   |
|-------|----|----|----|----|----|----------------------------|-------------|---------|--------|---------------|---|
| Month | 1  | 3  | 6  | 12 |    | Interest Payment Frequency | On Maturity | Monthly | Others | Interest Rate | % |
|       | 18 | 24 | 36 | 48 | 60 |                            |             |         |        |               |   |

|                         |         |
|-------------------------|---------|
| If to Beneficiary, Name | I.D.No. |
|                         |         |

|           |                |         |         |
|-----------|----------------|---------|---------|
| CDB A/C   | Account Number | Savings | Current |
| Other A/C | Bank           | Branch  |         |

|                      |         |         |                   |               |                  |
|----------------------|---------|---------|-------------------|---------------|------------------|
| Certificate Dispatch | Collect | By post | Nature of Renewal | With Interest | Without Interest |
|----------------------|---------|---------|-------------------|---------------|------------------|

|                                                                                                                                              |                               |                               |                               |
|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------|-------------------------------|
| ACCOUNT OPERATIONAL INSTRUCTIONS (JOINT ACCOUNTS ONLY)                                                                                       |                               |                               |                               |
| Withdrawal and for interest payment instructions of this deposit : Any one of the Deposit Holders All the deposit holders                    |                               |                               |                               |
| All the depositors must give their consent to obtain a loan against this deposit and / or to appoint or change the nominee for this deposit. |                               |                               |                               |
| 1. Account Holder's signature                                                                                                                | 2. Account Holder's signature | 3. Account Holder's signature | 4. Account Holder's signature |

|                                                                                                      |               |              |  |
|------------------------------------------------------------------------------------------------------|---------------|--------------|--|
| Nomination in terms of section 544(l) (d) of the Civil Procedure code (Amendment Act No. 14 of 1993) |               |              |  |
| Name with Initials                                                                                   |               |              |  |
| 1. Mr./Mrs./Miss/.....                                                                               |               |              |  |
| 2. Mr./Mrs./Miss/.....                                                                               |               |              |  |
| ID No.                                                                                               | Date of Birth | Relationship |  |
| 1.                                                                                                   |               |              |  |
| 2.                                                                                                   |               |              |  |

Address of the Nominee

1. \_\_\_\_\_
2. \_\_\_\_\_

**Purpose for opening the account usage**

|                                  |                          |                           |                          |                   |                          |
|----------------------------------|--------------------------|---------------------------|--------------------------|-------------------|--------------------------|
| Business Transactions            | <input type="checkbox"/> | Investment Purpose        | <input type="checkbox"/> | Family Remittance | <input type="checkbox"/> |
| Employment / Professional Income | <input type="checkbox"/> | Family inwards remittance | <input type="checkbox"/> |                   |                          |
| Any credit repayment             | <input type="checkbox"/> | Social & charity work     | <input type="checkbox"/> | Other (Specify)   | _____                    |

**Source of Funds (Expected source and nature of Credits in to the account)**

|                             |                          |                                       |                          |                               |                          |
|-----------------------------|--------------------------|---------------------------------------|--------------------------|-------------------------------|--------------------------|
| Sales and Business Turnover | <input type="checkbox"/> | Family Remittance                     | <input type="checkbox"/> | Investment Proceeds           | <input type="checkbox"/> |
| Salary /Professional income | <input type="checkbox"/> | Rent / Lease Income                   | <input type="checkbox"/> | Export Proceeds               | <input type="checkbox"/> |
| Contract Proceeds           | <input type="checkbox"/> | Donations /Charities (Local /Foreign) | <input type="checkbox"/> | Commission Income             | <input type="checkbox"/> |
| Membership Contribution     | <input type="checkbox"/> | Gift                                  | <input type="checkbox"/> | Sale/Profit/ Property /Assets | <input type="checkbox"/> |
| Other (Specify)             | _____                    |                                       |                          |                               |                          |

**Anticipated volumes – Expected / Usual average volumes of deposits into the account in rupees per month**

|                        |                          |                          |                          |                        |                          |
|------------------------|--------------------------|--------------------------|--------------------------|------------------------|--------------------------|
| Less than Rs. 50,000   | <input type="checkbox"/> | Rs. 50,001 to 100,000    | <input type="checkbox"/> | Rs. 100,001 to 250,000 | <input type="checkbox"/> |
| Rs. 250,001 to 500,000 | <input type="checkbox"/> | Rs. 500,001 to 1,000,000 | <input type="checkbox"/> | Rs. Over 1,000,000     | <input type="checkbox"/> |

**Annual Income**

|                            |                          |                              |                          |                            |                          |
|----------------------------|--------------------------|------------------------------|--------------------------|----------------------------|--------------------------|
| Less than Rs. 120,000      | <input type="checkbox"/> | Rs. 120,001 to Rs. 240,000   | <input type="checkbox"/> | Rs. 240,001 to Rs. 360,000 | <input type="checkbox"/> |
| Rs. 360,001 to Rs. 600,000 | <input type="checkbox"/> | Rs. 600,001 to Rs. 1,200,000 | <input type="checkbox"/> | Above Rs. 1,200,000        | <input type="checkbox"/> |

**Is the client or any member of his / her immediate family is a Politically Exposed Person (PEP)?**

Yes ☐ No ☐ If yes, please specify \_\_\_\_\_

**Does the customer appears in a suspected Terrorist List (Sanction List – UNSCR 1373/1267 ) or any other Alert List.**

Yes ☐ No ☐ If yes, please specify \_\_\_\_\_

**Overall risk grading of the customer, as per the risk grading received from the initial risk screening of the customer**

Low ☐ Medium ☐ High ☐

**TERMS AND CONDITIONS**

1. Fixed Deposits are not withdrawable before the expiration of the period set out in the Deposit Certificate except at the discretion of the management subsequent to three months notice.
2. Depositors will be notified of maturity of the deposit in writing set by ordinary post, at least two weeks prior to maturity.
3. Where the Depositor fails to give the Company seven day's written notice of intention to withdraw their deposits at maturity, such deposits inclusive of interest will be automatically renewed for the same period at a rate of interest prevailing at the time of such renewal.
4. The depositor/s will be required to surrender the Deposit Certificate with the endorsement on the reverse to obtain payment of the principal sum plus accrued interest.
5. In the case of joint deposits unless specific mention is made to the contrary, repayment of the capital and or the interest to either party, shall constitute a full, final and complete discharge to the company and the receipt for the payment made by the Company shall be valid good and sufficient as against either of the joint depositors.
6. The company reserves right to repay deposits without notice, but interest at the rate set out in the certificate will be paid to the depositor for the period the deposit remained with the Company.
7. Where a nomination has been made on a joint deposit such nomination shall be null and void if either of the depositors survive at maturity.
8. On the death of a joint holder the company's liability will be discharged by payment to the surviving holders.
9. On the death of a sole holder the company's liability will be discharged by payment to the nominee, or the legal heirs (in the absence of a nominee).
10. Any loss or destruction of the deposit Certificate should be immediately notified to the company, supported by an affidavit.
11. Any changes to address should be notified to the Company in writing.
12. Company reserves the right to refuse prematurity withdrawals, However may consider such withdrawals at its sole discretion on sympathetic or other consideration, subject to reduce rate of interest.

I /We do hereby confirm that I/we received the translation copy of this application contain in my / our preferred language and therefore the information furnished above in this application and attached annexure/s are true and accurate.

I/We have read and understood the terms and conditions relating to acceptance and withdrawal of Fixed Deposits. I/We hereby agree and undertake to abide by them.

|                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| 1. Account Holders' Signature | 2. Account Holders' Signature | 3. Account Holders' Signature | 4. Account Holders' Signature |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|

**Please make the Payment to the nearest Branch and obtain an official receipt.**

Office Use Only

Introducer Name:

Code:

Channel/Division: