

REQUEST FOR READY CASH DEPOSIT ACCOUNT

The Manager:			Date:
Branch:			
Sohar Internation	al (SAOG)		
Sultanate of Oma	n		
Dear Sir/Madam,			
Re: Request for F	ixed Deposit Placement		
This is to request y			(Amount. in figures:
in to Fixed Depos	it for the following period and		evailing interest of
Period	Interest Rate (P.A.)		
□12 Months:			
□24 Months			
□36 Months			
☐48 Months			
☐ 60 Months			
in the name(s) of .			
Please forward the	e Deposit Intimation to		
Address: P.O. Box	: Postal Code:	Area:	Tel:
or retained by the	bank (delete as necessary)		
Mode of Paymen ☐ Cash	t		
Debit Current A	Account No		
☐ Debit Savings A	Account No		
Cheque No		drawn or	n
☐ To be credited	upon realization of funds		
Premature Claus	e:		
than the rate appl	icable for the period for which	n deposit has rema	closure of deposits interest will be paid @ 1% less nined with the Bank as on the date of premature interest rate stipulated by the Bank.
			Signature of Depositor(s)