

Cantilan Bank, Inc.

_____ Branch

TIME DEPOSIT APPLICATION FORM

OP-053(07/13)

Depositor's Name:

Date Applied:

Time Deposit Product :

Regular Time Deposit-RTD ()

Premium Time Deposit - PTD ()

Amount for Deposit:

P

Term Applied:

_____ days

Interest Rate (Refer to Matrix):

Interest Withdrawal:

Monthly (),

Quarterly (),

Semi-Annual (),

Annually (),

Upon Maturity ()

I/We hereby certify that the details stated above are true and correct and therefore assumed that the same data are to be reflected in my/our Certificate of Time Deposit.

Signature Over Printed Name of Depositor

Signature Over Printed Name of Depositor

Checked by:

Approved by:

BOO

Branch Head