



Term Deposit - Constitution

D.O. Support Account No.: IDPN:

Customer Identification

Name: Address: Location: Postal Code: - TIN: B.I ☐ C.N.I ☐ Pass ☐ID number: Expiration Date: Indicative Mandatory FieldPhone: Email:

Term Deposit Offer

Standard: ☐Monthly Income: ☐Junior Savings Account: ☐Increasing Rate Deposit: ☐Welcome Deposit: ☐(New Resources)Emigrant Savings: ☐ Other: ☐

Constitution and Conditions

Amount / Currency | Amount in Words | Interest Rate | Start Date | Maturity Date | Interest Payment Frequency | On maturity: ☐ According to Product: ☐ Other: ☐ Interest Payment Options | Interest Capitalization: ☐ Interest Deposit to Demand Account: ☐According to the Product: ☐Maturity Options | Renew: ☐ Cancel: ☐ According to the Product: ☐

Customer Declaration

I hereby declare that I was previously provided with a copy of the Standardised Information Sheet for the Term Deposit, and therefore I sign this document, as well as any others that may be specifically required according to the type of account subscribed. I authorise the automated processing of the information contained in this document, in accordance with the law and for the intended purpose.

Signature: _____

Date: Signature identical to the one on the account opening form.

Reserved for Bank Use

D/P Account Number.:

iibCV - Commercial

iibCV - Operations

Signature: _____

Signature: _____

Date: Date: I have verified the data in this document by comparing it with the original documents