



PMF Finance PLC

No. 361,361/1, R. A. De Mel Mawatha, Colombo 03, Sri Lanka.
Company Reg. No. PQ 200

Fixed Deposit Application Form – Individual / Joint

Date

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

| Office Use Only | | |
|-----------------|------------|--|
| Deposit No: | | |
| Receipt No: | Introducer | |
| Customer | | |
| New | Existing | |
| Senior | Non-Senior | |
| Currency | LKR | |
| Branch | | |

Customer Information

| Main Depositor (M) | | | | | | | | | | | |
|--------------------------|------------------------------|--|---------------------------------|-------------------------------------|-------------------------------|--|--------|-------------------------------|---------------------------------|--|--|
| Title | <input type="checkbox"/> Mr. | <input type="checkbox"/> Mrs. | <input type="checkbox"/> Miss. | <input type="checkbox"/> Dr. | <input type="checkbox"/> Rev. | Other..... | Gender | <input type="checkbox"/> Male | <input type="checkbox"/> Female | | |
| Last Name with Initials | | | | | | | | | | | |
| Name Denoted by Initials | | | | | | | | | | | |
| NIC Number | | | | Occupation | | | | | | | |
| Date of Birth | | | | Name of the Employer | | | | | | | |
| Mobile Number | | | | Email | | | | | | | |
| Telephone Number | | | | Tax Payable | | Yes <input type="checkbox"/> No <input type="checkbox"/> | | If Yes, TAX File No. | | | |
| Nationality | | If Sri Lankan: <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Sri Lankan with dual Citizenship (Country.....), (Reason.....) | | | | | | | | | |
| | | Foreign National with dual citizenship / resident in or employed in Sri Lanka: Country..... VISA Expiry Date..... | | | | | | | | | |
| Permanent Address | | | | | | | | | | | |
| Mailing Address | | | | | | | | | | | |
| Marital Status | | <input type="checkbox"/> Married | <input type="checkbox"/> Single | <input type="checkbox"/> Other..... | Name of Spouse | | | | | | |

| Joint Depositor (J) | | | | | | | | | | | |
|--------------------------|------------------------------|--|---------------------------------|-------------------------------------|-------------------------------|--|--------|-------------------------------|---------------------------------|--|--|
| Title | <input type="checkbox"/> Mr. | <input type="checkbox"/> Mrs. | <input type="checkbox"/> Miss. | <input type="checkbox"/> Dr. | <input type="checkbox"/> Rev. | Other..... | Gender | <input type="checkbox"/> Male | <input type="checkbox"/> Female | | |
| Last Name with Initials | | | | | | | | | | | |
| Name Denoted by Initials | | | | | | | | | | | |
| NIC Number | | | | Occupation | | | | | | | |
| Date of Birth | | | | Name of the Employer | | | | | | | |
| Mobile Number | | | | Email | | | | | | | |
| Telephone Number | | | | Tax Payable | | Yes <input type="checkbox"/> No <input type="checkbox"/> | | If Yes, TAX File No. | | | |
| Nationality | | If Sri Lankan: <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Sri Lankan with dual Citizenship (Country.....), (Reason.....) | | | | | | | | | |
| | | Foreign National with dual citizenship / resident in or employed in Sri Lanka: Country..... VISA Expiry Date..... | | | | | | | | | |
| Permanent Address | | | | | | | | | | | |
| Mailing Address | | | | | | | | | | | |
| Marital Status | | <input type="checkbox"/> Married | <input type="checkbox"/> Single | <input type="checkbox"/> Other..... | Name of Spouse | | | | | | |

Fixed Deposit Details

| | | | | | | | | | | | |
|----------------------|--|---|---------------------------------------|-----------------------------------|--|-------------------------------------|-----------------------|--|--|--|--|
| Amount (Rs.) | | In Word | | | | | | | | | |
| Period | Months | Interest Rate | % | % (A.E.R) | | | | | | | |
| Interest Payable | <input type="checkbox"/> Monthly | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Biannually | <input type="checkbox"/> Annually | <input type="checkbox"/> Maturity | | | | | | |
| SMS Service | <input type="checkbox"/> Interest | <input type="checkbox"/> Renewal Reminder | Account Operating Instructions | | <input type="checkbox"/> Any one of us | <input type="checkbox"/> Both of Us | by..... | | | | |
| Certificate Dispatch | <input type="checkbox"/> Collected by hand | | <input type="checkbox"/> By Post | | | Signature/s | Main Depositor | | | | |
| Renewal Instructions | <input type="checkbox"/> With Interest | | <input type="checkbox"/> Capital Only | | | | Joint Depositor | | | | |

"Eligible deposit liabilities are insured with the Sri Lanka Deposit insurance scheme implemented by the Monetary Board for compensation up to a maximum of Rs.1,100,000/- per depositor."

| | | | | | | | | | | | | |
|------------------|--|--|--|--|--|--|--|--|--|--|--------|--|
| Beneficiary Name | | | | | | | | | | | NIC No | |
| | | | | | | | | | | | Bank | |
| Account No | | | | | | | | | | | Branch | |

Nominee Information

Nominations in terms of Section 544 of the Civil Procedure code (Amendment Act No. 4 of 2005)

| | Title | Full Name | NIC No | Date of Birth | Share % |
|----|-------|-----------|--------|---------------|---------|
| 1. | | | | | |
| 2. | | | | | |

Know Your Customer (KYC) - Main Depositor (M) & Joint Depositor (J)

FIU Definition

PEP's (Politically Exposed Persons) – Individuals in Sri Lanka or abroad who are or have been entrusted with prominent public functions.

Immediate Family Member – Includes the spouse, children and their spouses and parents, siblings and their spouses and grandchildren and their spouses.

Employment Information

| | | | |
|-------------------|--|--|---|
| Employment Status | Full Time Employed <input type="checkbox"/> M <input type="checkbox"/> J | Part Time Employed <input type="checkbox"/> M <input type="checkbox"/> J | Self Employed <input type="checkbox"/> M <input type="checkbox"/> J |
| | Retired <input type="checkbox"/> M <input type="checkbox"/> J | Not Currently Employed <input type="checkbox"/> M <input type="checkbox"/> J | Other : |

Nature of Business

| | | | | |
|---|---|--|---|---------------|
| Manufacturing <input type="checkbox"/> M <input type="checkbox"/> J | Transport <input type="checkbox"/> M <input type="checkbox"/> J | Restaurant <input type="checkbox"/> M <input type="checkbox"/> J | Real Estate <input type="checkbox"/> M <input type="checkbox"/> J | Other : |
| Finance/Insurance <input type="checkbox"/> M <input type="checkbox"/> J | Hotel/Boarding House <input type="checkbox"/> M <input type="checkbox"/> J | Import/Export <input type="checkbox"/> M <input type="checkbox"/> J | Public Services <input type="checkbox"/> M <input type="checkbox"/> J | |
| Construction <input type="checkbox"/> M <input type="checkbox"/> J | Casino/Gambling/Night Clubs <input type="checkbox"/> M <input type="checkbox"/> J | Communications <input type="checkbox"/> M <input type="checkbox"/> J | Gem & Jewellery <input type="checkbox"/> M <input type="checkbox"/> J | |
| Retail <input type="checkbox"/> M <input type="checkbox"/> J | Personal Household Services <input type="checkbox"/> M <input type="checkbox"/> J | Wholesale <input type="checkbox"/> M <input type="checkbox"/> J | Business Services <input type="checkbox"/> M <input type="checkbox"/> J | |
| | | | | |

Other Informations

| | | |
|--|---|---|
| Ownership of Wealth (If property is on rent or lease, please indicate) | Residential Property <input type="checkbox"/> M <input type="checkbox"/> J | Business Premises <input type="checkbox"/> M <input type="checkbox"/> J |
| | Motor Vehicles <input type="checkbox"/> M <input type="checkbox"/> J | Financial Assets <input type="checkbox"/> M <input type="checkbox"/> J |
| Source of Wealth : Wealth generated from | Investments <input type="checkbox"/> M <input type="checkbox"/> J | Other: |
| | Business / Ownership <input type="checkbox"/> M <input type="checkbox"/> J | Inheritance <input type="checkbox"/> M <input type="checkbox"/> J |
| | Investments <input type="checkbox"/> M <input type="checkbox"/> J | Other: |
| | Profession / Employment <input type="checkbox"/> M <input type="checkbox"/> J | Business Premises <input type="checkbox"/> M <input type="checkbox"/> J |
| Are you or any your immediate family is a politically exposed person (PEP)? (Refer definition above) | Yes <input type="checkbox"/> M <input type="checkbox"/> J | No <input type="checkbox"/> M <input type="checkbox"/> J |
| | | If yes, please specify..... |

Expected Mode of Transaction

Cash Cheque Electronic Fund Transfer Other:

Source of Funds: Expected Source and nature of credits in the account

| | | | | |
|---|--|---|--|--------------|
| Family Remittance <input type="checkbox"/> M <input type="checkbox"/> J | Commission Income <input type="checkbox"/> M <input type="checkbox"/> J | Contract Proceeds <input type="checkbox"/> M <input type="checkbox"/> J | Sale/Business Turnover <input type="checkbox"/> M <input type="checkbox"/> J | Other: |
| Investment Proceeds <input type="checkbox"/> M <input type="checkbox"/> J | Sale of Property/Asset <input type="checkbox"/> M <input type="checkbox"/> J | Gift <input type="checkbox"/> M <input type="checkbox"/> J | Salary/Profit Income <input type="checkbox"/> M <input type="checkbox"/> J | |

Purpose of opening the account and the usage

| | | | |
|---|--|--|--|
| Savings <input type="checkbox"/> M <input type="checkbox"/> J | Investment Purpose <input type="checkbox"/> M <input type="checkbox"/> J | Employment/Professional Income <input type="checkbox"/> M <input type="checkbox"/> J | Share Transactions <input type="checkbox"/> M <input type="checkbox"/> J |
| Business Transactions <input type="checkbox"/> M <input type="checkbox"/> J | Family Remittance <input type="checkbox"/> M <input type="checkbox"/> J | Loan Repayment <input type="checkbox"/> M <input type="checkbox"/> J | Utility Bill Payment <input type="checkbox"/> M <input type="checkbox"/> J |
| In the case of foreign passport holders give the reason for opening the account in the foreign jurisdiction | | | Other: |

Expected Turnover / Volume of Business (Monthly)

| | | |
|--|--|---|
| Less than 50,000 <input type="checkbox"/> M <input type="checkbox"/> J | 50,001 to 100,000 <input type="checkbox"/> M <input type="checkbox"/> J | 100,001 to 250,000 <input type="checkbox"/> M <input type="checkbox"/> J |
| 250,001 to 500,000 <input type="checkbox"/> M <input type="checkbox"/> J | 500,001 to 1,000,000 <input type="checkbox"/> M <input type="checkbox"/> J | More than 1,000,000 <input type="checkbox"/> M <input type="checkbox"/> J |

Terms & conditions

- Interest on Premature Withdrawal:** For early withdrawal, the interest rate is adjusted and applied only to the period the deposit was held.
- Automatic Renewal:** If no withdrawal instructions are received before maturity, deposits will automatically renew for a similar period at prevailing rates. The renewal confirmation, including the new rate and amount, will be provided within two weeks.
- Certificate Requirement for Maturity Payment:** The original deposit certificate, endorsed by the depositor(s), must be surrendered to receive the principal and accrued interest. Depositors should notify the company at least seven days before maturity.
- Withdrawal Restrictions:** Fixed Deposits (FDs) cannot be withdrawn before the maturity date, except with management approval.
- Discharge of Responsibility on Joint Deposits:** For joint deposits, repayment to either party fully discharges the company's obligation, unless specified otherwise.
- Right to Repay Without Notice:** The company reserves the right to repay deposits early without notice, paying interest only for the period held.
- Nomination on Joint Deposits:** If a nomination is made on a joint deposit, it becomes null and void if any of the joint depositors survive at maturity.
- Death of Joint Holder:** In the event of a joint holder's death, the company's liability is discharged by paying the surviving holder(s).
- Death of Sole Holder:** On the death of a sole holder, the company's liability is discharged by paying the nominee.
- Loss of Certificate:** Any loss of the deposit certificate should be reported to the company immediately, accompanied by an affidavit.
- Address Changes:** Depositors must notify the company in writing of any address changes.

"I hereby confirm that I have thoroughly read and understood the terms and conditions pertaining to the acceptance and withdrawal of Fixed Deposits. I further undertake to abide by these terms and conditions, and I certify that the details provided in this application are accurate and true to the best of my knowledge."

.....
Signature of Main Depositor

.....
Signature of Joint Depositor

Mandatory Checks (For Office use Only)

- Name, Date of Birth and Nationality Verifications: To be supported by one of the following - National Identity Card / Passport (Unexpired) / Driving License / Marriage Certificate (Name Change)
- Address Verification: Residential address to be supported by one of the following accepted documents - National Identity Card / Bank Statement / Letter from a public authority / Tenancy agreement / Utility bill (Specify)..... / Income Tax Receipt / Assessment Notice / Driving License / Employment Contract / Passport / Any other Identification document (Specify).....
(Photocopies of the above documents should be obtained and certified by the Company Officer as "Original Seen")
- Does the client appear in the known suspected terrorist list or any other alert list? Yes No If yes (Specify).....

Check List

| | | | | |
|--|---|--|--|--|
| FD Receipt Attached <input type="checkbox"/> | Bank Statement / Cheque Realization attached <input type="checkbox"/> | FD application information filled <input type="checkbox"/> | Nominee Details submitted <input type="checkbox"/> | Interest payment details filled <input type="checkbox"/> |
| KYC form submitted <input type="checkbox"/> | Copy of NIC/DL/PP <input type="checkbox"/> | Billing Proof <input type="checkbox"/> | Distance Verification Submitted <input type="checkbox"/> | Risk Form <input type="checkbox"/> |
| Screening – M & J <input type="checkbox"/> | Screening - Nominee <input type="checkbox"/> | PEP Confirmation submitted <input type="checkbox"/> | Rate approval <input type="checkbox"/> | Previously FD Certificate <input type="checkbox"/> |

| | | | | |
|-----------|---------|----------------------|-------------|-------------|
| | Adviser | Checked / Entered by | Verified by | Approved by |
| Signature | | | | |
| Name | | | | |