

FIXED/CALL DEPOSIT ACCOUNT APPLICATION FORM

Please complete this form in capital letters.

A. INDIVIDUAL APPLICANT'S DETAILS

Transfer principal & interest to savings account

First Name	Middle Name		Last Name	
	Date of E			
Email:	Phone I	No.:		
(Tick where appropriate*)	Fixed Call Duration: 3	6 12	Rate per Year:	
Amount in Figures:				
Amount in Words:				
Date of Registration:/	/Registration N	0.:		
Permanent Address:				
Email:	Phone	No.:		
(Tick where appropriate*)	Fixed Call Duration: 3	6 12	Other:	
Amount in Words:				
FD Maturity Instructions Renew principal and interes Renew principal and transference	st er interest to savings account			



TO THE JITEGEMEE SACCO SOCIETY LIMITED

I/ We agree that this account shall be operated solely at the discretion of the SACCO and hereby agree to indemnify the SACCO at my/our cost against any loss or claims arising out of the account being closed by the SACCO without notice due to unsatisfactory performance. I/We confirm having read and understood the General Terms and Conditions contained in the overleaf for operating the FOSA account, this date ____/___ and which I/We accept.

Applicants signature(s)

 Signature 1: ______
 Signature 2: ______
 Signature 3: ______

FOR OFFICIAL USE ONLY		
Account number generated		
Initiated by:	Sign:	_ Date://
Approved by:	Sign:	_ Date://

FOR OFFICIAL USE ONLY

- Fixed term deposits holder has an option to roll over the deposit to another period upon maturity.
- The minimum deposit is Kes. 10,000
- The account does not attract a periodic ledger fee.
- Competitive interest rate will be determined from time to time.
- The account is linked to the Ordinary Account where on maturity the proceeds (deposit plus interest) are automatically transferred to the Ordinary Account.