RENEWAL DETAILS

DATE OF RENEWAL	PRINCIPAL AMOUNT	MATURITY DATE	MATURITY AMOUNT	RATE OF INTEREST	SIGNATURE OF OFFICIAL

Please submit Form 15G/15H, else bank will deduct TDS as per applicable rate.

Unless otherwise opted for, Bank will auto renew the deposit on maturity for a similar term.

Please close the Fixed Deposit and transfer the fund to my account no. ______

Signature of Account Holder

small finance bank

Contact: +91 8048329999

www.slicebank.com Email:help@slicebank.com CIN: U74999MH2019PTC324502

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