



CIN: L65191TN1986PLC012840

Regd Office: 123, Angappa Naicken Street, Chennai - 600 001 Phone: +91 44 2534 1431

Admn Office: New No.221(Old No.129), Royapettah High Road,

Mylapore, Chennai 600 004 Phone: +91 44 4391 5300

Secretarial Office: 144, Santhome High Road, Mylapore, Chennai - 600 004

Website: www.shriramcity.in Email: sect@shriramcity.in ,

INTEREST RATES ON ACCEPTANCE OF FRESH/RENEWAL OF DEPOSITS (w.e.f. October 10th .2016)

Period (months)	Non-Cumulative Deposits				Cumulative Deposit		
	Monthly % p.a	Quarterly % p.a	Half yearly % p.a	Yearly %p.a	Effective Yield % p.a	Actual maturity value for Rs. 1000/- (up to two decimal)	maturity value for Rs. 5000/-
12	7.72	7.77	7.85	8	8	1079.99	5,400
24	7.81	7.86	7.94	8.1	8.42	1168.47	5,842
36	7.95	8	8.08	8.25	8.94	1268.35	6,341
48	8.14	8.2	8.28	8.45	9.58	1383.34	6,916
60	8.19	8.25	8.33	8.5	10.08	1503 <mark>.</mark> 97	7,520

Non Cumulative/Cumulative deposits will be accepted in multiples of ₹1,000/- subject to a minimum amount of ₹5,000/- per deposit for cumulative deposit and ₹10,000/- per deposit for non cumulative deposit and Cumulative deposits can be renewed for maturity value.

Additional benefit 0.25% per annum for Senior citizen is provided (Completed age 60 years on the date of deposit/renewal)

Application form for Deposit Shriram City Union Finance Limited

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SHRIRAM City MONEY WHEN YOU NEED IT MOST Branch TR No. TR Date **Broker Name** Broker Code Broker Channel:

Admin Office: New No.221(Old No.129), Royapettah High Road, Mylapore, Chennai 600 004 Phone: +91 44 4391 5300 Secretarial Office: 144, Sonthome High Road, Mylapore, Chennai - 600 004 Website: www.shriramoity.in Email: sect@shriramoity.in , We neither accept nor permit intermediary to accept cash. Please fill the information in BLOCK letters and tick in appropriate places Affix a latest I/We wish to apply for Placement/Renewal of Deposit photograph (DO NOT STAPLE) Type of Deposit Fresh Renewal Both ___ Payment Details Cheque Dated Cheque/DD No. Maturity Date J. If Renewal, Old Cert No. Balance to be refunded / paid Rs. Maturity Amount Rs._ Renewal Amount Rs. Total Investment Amount _ (Rupees Investor details as appearing in your submitted identification documents Name of Applicant DOB Gender 1st Applicant Mr./Ms./Minor Father's/Husband's/Natural Guardian's Name ____ 2nd Applicant Mr./Ms./Minor_ Father's/Husband's/Natural Guardian's Name ____ 3rd Applicant Mr./Ms./Minor_ Father's/Husband's/Natural Guardian's Name____ Address of 1st/Sole Depositor_ City State PIN Code Income Tax Permanent Account Number (PAN) Tax to be deducted Aadhaar Card Number 15G/H (For Senior Citizens) No: Existing Folio Number (If Existing Investor) KYC Documents (Id proof and Address proof) b) PAN Card with Address proof e) Job card issued by NREGA duly signed by an officer of the State Government [f) The letter issued by Unique identification Authority of India containing details of Name, Address & Aadhar Number (g) Utility Bill (Electricity/Telephone/Postpaid mobile phone/Piped Gas/Water Bill) not more than 2 months old (h) Bank Account or Post Office saving bank account statement I) Others (Kindly Specify) Type of Receipt Scheme Interest Frequency (Only Mode of Interest Cumulative Deposit Physical Receipt for Non-Cumulative) Payment Non-Cumulative Deposit Monthly Auto Renewal/Refund (Mandatory if E-Receipt opted) Tenure (Months) Quarterly ECS. Renew Principal only on Maturity Half-Yearly 24 12 36 NEFT Renew Principal and interest on Maturity 60 Annual Redeem on Maturity Repayment to be made to: Sole / First Applicant Anyone or Survivor/s Former/Survivor Details of Bank Account (Sole / First Named Depositor) Savings Current 9 Digit MICR Code Account Number_ (as appearing on MICR cheque issued by bank) Bank. IFSC Code Branch: (Bank Account Details are Mandatory)

Please note: 1) Guardian Name is mandatury if any of the applicant is Minor.

2) In the case of deposit in the name of Minor only the FATHER or MOTHER of the Minor should sign this form.

3) Age proof to be submitted if 1st Applicant is Minor/Senior Citizen.

Email/SMS alerts for all details relating to my deposit with SCUF may be sent to the undermentioned mail Id/Mobile number Mobile Number Declaration: I/We have read the Terms and Conditions of the company and accept that they are binding on me/us. I/We hereby declare that the first named depositor mentioned in my/our application is the beneficial owner of this deposit and as such he / she should be treated as the payer for the purpose of tax deduction under Section 194A of the Income Tax. Act, 1961. I/We hereby agree to abide by the attached terms and conditions governing the deposit. I/We have gone through the financials and other statements/representations/particulars furnished /made by the company and after careful consideration, I/We/am /are making the deposit with the company at my /our own risk and volition... 1/We further declare that, I/We am/are authorised to make this deposit in the above mentioned scheme Shriram Siddhi Fixed Deposits and that the amount kept in the deposit is through legitimate source and does not involve directly or indirectly any proceeds of schedule of offence and/or is not designed for the purpose of any contravention or evasion of the provisions of the Prevention of Money Laundering Act, 2002 and any Rules, Notifications, Guidelines or Directions there under, as amended from time to time. I/We shall provide any further information and fully co-operate in investigation as and when required by the Company in accordance to the applicable Law. I/We further affirm that the detail provided by me/us is/are true in all respect and nothing has been concealed. Signature of the Depositor's (Other than Individual, please mention Name & Designation) Signature Name Designation First Applicant/Guardian Second Applicant Third Applicant Nomination (Optional) Where the investment is in the name of Minor, the Nomination should be signed by person lawfully entitled to act on behalf of I/We hereby nominate the following person to receive the amount payable to me/us, on my/our death. Nominee Name Address of Nominee City____State____ Relationship with Depositor (If Any) Age of Nominee Date of Birth of Nominee (If Minor)* * As the Nominee is Minor on this date, I/We appoint (Name, Address & Age) ___ to receive the amount of Deposit on behalf of the Nominee in the event of my/our/minor's death during the minority of the nominee. Signature of Depositors Name and Address of Witness for Nomination for Nomination First Applicant/Guardian_ Second Applicant ___ Third Applicant Signature of Witness____ Signature of Witness Investors are strongly advised to have their accounts in Joint names or use nomination facility. Interest rates are subject to change and the rate applicable will be the rate prevalent on the date of investment.

NRI investors are requested to furnish passport copy with Visa page, domestic and international address.

For office use only

TR number	Cert number	Cert date	Checked By	Authenticated by	Authentication date
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