

APPLICATION FOR PURCHASE OF CAL INVEST PLUS

	Branch
	Date
Tenure of Investment (please tick)	
1MTHS 2MTHS 3MTHS	4MTHS 5MTHS 6MTHS
7MTHS 8MTHS 9MTHS	10MTHS 11MTHS 12MTHS
Name of Applicant	
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	Rate Applicable:
Effective Date:	
Kindly note that prevailing disco	unt rates apply when you disinvest before maturity
SOURCE OF FUNDS Source of funds passing through the acco	unt (Please tick where applicable)
Corporate:	
Sales Proceeds Trust funds per trust	deed Services rendered Other, please specify
Individual: Personal Savings Salary Busine:	ss Operations Loan Collateral Other, please specify
Tersonal Savings Salary Basines	25 Operations
Special Instructions on maturity of inv	vestment (please tick as appropriate)
Roll over Principal & interest on maturity	Pay interest & roll over principal on maturity
Pay both principal and interest on maturi	ty
A/C to be debited (For CalBank Account	Holders Only)
Signature of Applicant(s)	Signature of Applicant(s)
Name of Applicant	Name of Applicant
Date	Date
OFFICIAL USE	
	ustomer ID Walk in Client
CIP No	MM No
Processed by	Checked/Authorized by