

## INDIVIDUAL INVESTMENT APPLICATION

Branch \_\_\_\_\_

		_		
Name				
Address				
Type of Investment New Invest	tment	Top-up	☐ Call I	
		lays 365 days		
Call Deposits 212 days	_	70 days	Date of Inve	estment dd / mm / yyyy
Investment Amount (GH¢)		7 0 44,5		Interest Rate
Investment amount in words				The last factor
investment amount in words				
Account No.				
Bank Details Bank Cheque No.				
Source of income Business Salary Investment Inheritance/Gift Other				
Pay interest on principal Pay the principal amount plus interest Pay interest Monthly Quarterly Half Yearly Will advise what to do on maturity  Please Note: Investment would be rolled over automatically if no instruction is received within 48 hours.  Beneficiary(ies) Details				
NAME	AGE	relationship	% SHARE	CONTACT/ADDRESS
			<u> </u>	
Have you previously invested with CDH Savings & Loans Ltd?  Yes  No				
If yes, please provide your Investment No	•			
Applicant's Signature				D D / M M / Y Y Y Y  Date
FOR OFFICIAL USE ONLY				
Signature of Receiving Officer			Sign	ature of Authorising Supervisor