

SWEEP IN/SWEEP OUT FACILITY FORM FOR CURRENT ACCOUNT

(All fields marked with * are mandatory) and to be filled in CAPITAL LETTERS only.

 Date D D M M Y Y Y Y

CUSTOMER DETAILS

CIF ID		A/c No.	
Customer Name			
	PREFIX	FIRST NAME	MIDDLE NAME
		LAST NAME	
<input type="checkbox"/> I Wish to opt for Sweep in/out facility on the above account		<input type="checkbox"/> Smart Business (Threshold INR 25,000)	
		<input type="checkbox"/> Priority Business (Threshold INR 1,50,000)	

DETAILS OF SWEEP FACILITY

- 1 Sweep In/Out is a facility which provides liquidity of a current Account coupled with higher interest earnings of a Fixed Deposit (FD)
- 2 Through Sweep Out facility, current balance from the account is transferred automatically into a Fixed Deposit, at a specific threshold limit depending on the current account variant
- 3 Fixed deposits are formed for default tenor of 7 days only, at applicable interest rates
- 4 Sweep In facility is enabled by default for all FDs book through Sweep Out

Current Account	MAB	Threshold for Sweep	Sweep Out Multiples	Minimum FD Value	Default FD Tenure
Smart Business	INR 10000	INR 25000	INR 5000	INR 5000	7 Days
Priority Business	INR 100000	INR 150000	INR 5000	INR 5000	7 Days

- 5 Sweep Out FD will be for maximum amount < 2 Crore

DECLARATION & SIGNATURE(S)

I/We, the undersigned, have read, understood and agree to absolutely and unconditionally abide by and be bound by the Terms and Conditions of sweep facility, in relation to all my/our current accounts, for present and future, maintained/opened/to be opened with Fincare Small Finance Bank Limited. I/We understand that in case of activation of Sweep facility, the bank shall be creating a fixed deposit accounts as per the product features.

Sign as per Account Details

Signature	Signature	Signature
Name of First Account Holder/ Authorised Signature with Seal	Name of Second Account Holder/ Authorised Signature with Seal	Name of Third Account Holder/ Authorised Signature with Seal

Customer Acknowledgement Copy

..... (Ack No)

Request Type: Activation of Sweep facility

 Date D D M M Y Y Y Y

Branch Staff Name:

Employee ID:

Branch Staff Signature:

Signature of Branch Officials