Business Fixed Term Deposit Account Maturity Instructions Amendment Form

How to complete the form

1 Please use a BLACK pen

2 Mark boxes like this

If you make a mistake, do this and mark the correct box

3 Please use BLOCK CAPITAL LETTERS and leave one space between each word A 2

During the term of your Account, you can amend the Maturity instructions by completing the details below.

Name(s)

Account Details

BIC Code A I B K I E 2 D

IBAN Number

Part 1: At maturity I/we wish to

1. **Full Reinvestment**

   Reinvest all funds for the investment period of: 6 Months ☐ 1 Year ☐ 2 Years ☐

2. **Partial Withdrawal**

   a) **Withdraw interest and reinvest the balance*** ☐

   Reinvest remaining funds for the investment period of: 6 Months ☐ 1 Year ☐ 2 Years ☐

   *Please complete Part 2 – Payment Details

   b) **Withdraw a specified amount and reinvest the balance*** ☐

   Amount of

   €

   Reinvest remaining funds for the investment period of: 6 Months ☐ 1 Year ☐ 2 Years ☐

   *Please complete Part 2 – Payment Details

   c) **Withdraw interest and a specified amount and reinvest the balance*** ☐

   In addition to interest, I would like to withdraw a specified amount of

   €

   Reinvest remaining funds for the investment period of: 6 Months ☐ 1 Year ☐ 2 Years ☐

   *Please complete Part 2 – Payment Details

3. **Full Withdrawal and Close**

   Withdraw all funds and close my Account ☐

   *Please complete Part 2 – Payment Details

Part 2: Payment Details

Please transfer my funds to my/our AIB payment account

BIC Code A I B K I E 2 D

IBAN Number

Name of Account Holder

IMPORTANT: Please ensure that your Maturity instructions are accurate and complete. If your Maturity instructions are inaccurate or incomplete, or the funds in your Account fall below the required minimum balance, or there is a conflict in your Maturity instructions, we may open up an AIB Demand Deposit account for you and transfer the balance of your Account to the new account.

Signature(s)

Date Day / Month / Year

Date Day / Month / Year

Date Day / Month / Year

Date Day / Month / Year

Allied Irish Banks, p.l.c. is regulated by the Central Bank of Ireland.

For Bank Use Only

I confirm that the maturity instructions above have been fully completed by the customer and the amendment updated on the system

Acknowledged by: Staff Signature

Please confirm the Customer signature has been verified and how

Branch Brand and Date