

FORM – E

(See sub rule (1) of rule 8 and rule 9)

Serial No.....

APPLICATION FOR CLOSURE OF AN ACCOUNT UNDER SENIOR CITIZENS SAVINGS SCHEME, 2004

TO

The Postmaster/Incharge,

.....(name of the Deposit office)

.....

Subject: Application for withdrawal/closure of account.

Sir,

1. I,, son/daughter/wife of resident of and depositor of account No. (hereinafter referred to as the 'said account') hereby apply for closure of the said account with immediate effect. The interest of Rs..... and deposit of Rs..... TOTAL (INTEREST+DEPOSIT) Rs..... (Rupees.....), *after adjustment of overpaid interest and/or deduction equal toper cent of the deposit, amounting to Rs..... (Rupees.....) and any other charges, recoverable from me in respect of the account in question, may kindly be refunded to me immediately.

2. The Pass Book is enclosed.

Signature or thumb impression of the Depositor

FOR USE BY THE DEPOSIT OFFICE

ACCOUNT No.....DATE OF DEPOSIT.....AMOUNT OF DEPOSIT: Rs.....

Withdrawal on account of Interest Rs..... and deposit Rs..... totalling to Rs..... (Rupees.....) is sanctioned in favour of the depositor.

*Recovery of overpaid interest Rs....., deduction of Rs..... and Other Charges (to be specified) Rs..... totalling to Rs..... (Rupees.....) has been adjusted.

NET AMOUNT PAID Rs..... (Rupees.....)

RECEIPT

Received a sum of Rs..... (Rupees.....) from..... (Name of Deposit office) as per details furnished above.

Signature / Thumb impression of the depositor

Signature of in-charge of Deposit Office
(Alongwith name and designation stamp)

*: Score out whichever is not applicable.