FORM – 2

[See sub-paragraph (1) of paragraph 7]

(Application for premature closure of account)

The Destmester/Manager	
The Postmaster/Manager	
Sir,	•
1. I wish to prematurely close my	Account Nohaving balance of Rs
(Rupees	Only) and request you to pay the amount after
deduction of applicable penalty as per details	given below:-
Please Credit the amount to my SB at	Account Nostanding(Name of Account office).
	or
Please issue a Demand Draft/account payee ch	
	or
Please pay in cash (applicable if the amount is	below permissible limit)
3. I hereby declare that the provisions unbeen complied with.	nder which the account can be closed before maturity have
Necessary documents as applicable are attached	ed as under:-
1.	
1.	
2.	
	rawn/loan to be availed is required for the use of live and still a Minor.
*Certified, that the amount sought to be withdwho is a	
*Certified, that the amount sought to be withdwho is a Date:	live and still a Minor.
*Certified, that the amount sought to be withd	Signature or thumb impression of depositor/guardian attested by a person known to the accounts office)
*Certified, that the amount sought to be withd	Signature or thumb impression of depositor/guardian attested by a person known to the accounts office) or office use only Payment detail
*Certified, that the amount sought to be withd	Signature or thumb impression of depositor/guardian attested by a person known to the accounts office) or office use only Payment detail
*Certified, that the amount sought to be withd	Signature or thumb impression of depositor/guardian e attested by a person known to the accounts office) or office use only Payment detail
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*Certified, that the amount sought to be withd	Signature or thumb impression of depositor/guardian e attested by a person known to the accounts office) or office use only Payment detail
*Certified, that the amount sought to be withd	Signature or thumb impression of depositor/guardian e attested by a person known to the accounts office) or office use only Payment detail (In figures) Signature of Postmaster/Manager Acquittance account holder/ messenger)
*Certified, that the amount sought to be withd	Signature or thumb impression of depositor/guardian e attested by a person known to the accounts office) or office use only Payment detail

Signature/thumb impression of depositor/guardian