



FORM – 3
(Application for Withdrawal)

To,
The Branch Manager

.....
.....

Sir,

I (Depositor/guardian) hereby apply for
Withdrawal from my account as per details below:-

Account Number:.....

Amount of withdrawal applied.....

*Certified, that the amount sought to be withdrawn to be availed is required for the use of
..... who is alive and still a Minor.

2. Please Credit the amount of withdrawal to my SB Account no. _____ standing
at _____ (Name of Account office).

Or

Please issue a Demand Draft/account payee cheque

Or

Please pay in cash (applicable if the amount is below permissible limit of cash payment).

3. I certify that all the conditions applicable under scheme for grant of withdrawal have been complied
with.

Necessary documents as applicable are attached as under:-

- 1.
- 2.

Date:- _____

Signature or thumb impression of depositor/guardian

Attested By _____

(Attestation is applicable in case of thumb impression)



For office use only
Payment detail

Amount available in Account Rs . _____
Date of Initial Subscription _____
Date on which last withdrawal was allowed _____
Total Amount granted for withdrawal Rs . _____ (In figures)
(In words) _____

Date Stamp

Signature of Branch Manager

Acquittance
(to be filled by depositor)

Received Rs . _____ (In figures) _____ (in words) By cash/cheque/DD
bearing no.....dated...../by transfer to Account
No.....

Date

Signature/thumb impression of depositor/guardian