FORM -2

Application for premature closure of account

To, The Postmaster/Manager	
Sir,	
I/we wish to prematurely close my/our having balance of opened under KisanVikas Patra Scheme and recof applicable penalty as per details given below:-	(Rupees Only)
Please Credit the amount to my SB standing at	
or	
Please issue a Demand Draft/account payee che	que
or	
Please pay in cash (applicable if the amount is be	elow permissible limit)
3. I/We hereby declare that the conditions before maturity under the KisanVikas Patra Sche *Certified, that the amount held in the acceptation	me have been complied with. ccount is required for the use of
Date: Si holder(s)/guardian	gnature or thumb impression of account
(Thumb impression of the depositor should be a office)	
For office u	se only
Payment of	detail
Eligible balance in Account `	
Less Penalty amount `	
Total Amount to be paid `	
(In words)	

Date Stamp

Signature of Postmaster/Manager

Acquittance

(to be filled by account holder/ messenger)									
Received Rs		(In	figures)			(in	words)	Ву	
cash/cheque/DD	bearing	No.)		_dated	/	/by	transfer	to	
Account No									
Date		Sigr	nature/thumb in	npression of acc	ount hol	der	(s)/guard	ian	