FORM -3

Application for premature closure of account

To,
The Postmaster/Manager
……
……

Sir,

1. I/we wish to prematurely close my/our Account No_____ having balance of _____(Rupees_____ Only) opened under Senior Citizen Savings Scheme and request you to pay the amount after deduction of applicable penalty, as per details given below:-

Please Credit the amount 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)

3. I/We hereby declare that the conditions under which the account can be closed before maturity under Senior Citizen Savings Scheme have been complied with.
Necessary documents as applicable are attached as under:-

1.
2.

Date:-_____ Signature or thumb impression of account holder/s

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(Thumb impression of the depositor should be attested by a person known to the accounts office)

For office use only

Payment detail

Eligible balance in Account ` .____

Less Penalty amount `.____

Total Amount to be paid ` ._____(In figures)

(In words)_____

Date Stamp Signature of Postmaster/Manager

Acquittance

(to be filled by account holder/ messenger)

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

Date Signature/thumb impression of Depositor/s