FORM – 2 [See sub-paragraph (1) of paragraph 7] (Application for premature closure of account)

| To, The Postmaster/Manager |
|--|
| |
| Sir, |
| 1. I wish to prematurely close my Account Nonaving balance of(Rupees |
| Please Credit the amount to my SB Account no(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 hereby declare that the provisions under which the account can be closed before maturity have been complied with. Necessary documents as applicable are attached as under:- 1. 2. |
| *Certified, that the amount sought to be withdrawn/loan to be availed is required for the use ofwho is alive and still a Minor. |
| Date: Signature or thumb impression of depositor/guardian |
| (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

| | | Acquittar | nce | | |
|---------------------|---------|--------------|------------------------|----------------|------|
| Received Rs | ` | 3 | older/ messenger) | _ (in words) | Ву |
| cash/cheque/DD | bearing | No.) | dated | | _/by |
| transfer to Account | : No | | | · | |
| | | | | | |
| Date | | Signature/th | numb impression of dep | oositor/guardi | an |