

FORM - F

(See sub-rules (3) and (4) of rule 8)

Serial No _____.

**APPLICATION FOR CLOSURE OF ACCOUNT UNDER SENIOR CITIZENS SAVINGS SCHEME, 2004
BY SPOUSE(JOINT HOLDER) / NOMINEE(S)/LEGAL HEIRS**

TO

The Branch Manager/Incharge,

_____(name of the Deposit office)

_____.

Subject: Application for withdrawal / closure of account.

Sir,

I/WE* _____ the spouse (Joint holder) / nominee(s) / legal heirs of
late _____, the depositor to the Senior Citizens Savings Scheme, 2004 account
No _____ wish to withdraw the entire amount standing to the credit of the deceased
in the said account.

Please find enclosed:-

- (i) A certificate in regard to the death of the Depositor.
- (ii)*A Certificate in regard to the death of Shri/ Shrimati _____ and
Shri/Shrimati _____ also the nominee(s) appointed by the Depositor.
- (iii)** Succession Certificate/Letter of Administration with attested copy of probated will of the deceased
depositor issued under the provisions of the Indian Succession Act, 1925.
- (iv) Pass Book of the Depositor.
- (v) # Letter of Indemnity.
- (vi)# Affidavit.
- (vii)# Letter of disclaimer on affidavit.

Signature or thumb impression of claimant(s)

Witness _____

_____(Signature, name and address)_____.

Date _____.

Place _____.

FOR USE BY THE DEPOSIT OFFICE

Withdrawal of Rs _____ (Rupees _____)
is sanctioned.

Adjustments made (to be specified)
(Rupees _____)

Rs _____

NET **AMOUNT** **PAYABLE**
(Rupees _____)

Rs _____

RECEIPT TO BE SIGNED BY THE CLAIMANT(S)

Received a sum of Rs _____ (Rupees _____)
from _____ (Name of Deposit office) as per details furnished above, in full
settlement of our claim.

Signature / Thumb impression of the claimant(s)

Signature of in -charge of Deposit Office
(Alongwith name and designation stamp)

***: Delete whichever is not applicable.**

**** : Strike off if there is a valid nomination.**

#: To be produced by legal heirs, in the absence of nomination(s) for claims upto Rs. 1 lakh.