

Annexure: 2

For Office Use only	Reference /Request No. of	
	System &	
	Date	

Format of an application to be submitted by customer for activation of unclaimeddeposit account and refund of balance transferred to RBI.

To The Branch ManagerBranch	
Dear Sir,	
Re : (1) My Unclaimed Deposit Account No	
I / We am/are maintaining Savings/Current account Noyour branch.	with

2. Due to non operation of my account balance was transferred to RBI as perguidelines issued by RBI under Depositors Education Fund Scheme, 2014.

1. I/we could not operate account for 10 years and more due to

3. I / We am/are submitting herewith my/our KYC documents (original for verification with copy for Bank's record) mentioned as under with my recent photograph and request to claim the balance from RBI and credit my account.

Sr. No.	Name of the Account Holder	KYC Documents with Detail			
			Document Name	Issue Date & Authority	Expiry Date
1		1			
		2			
		3			
2		1			
		2			
		3			



શ્રી બનાસકાંઠા જીલ્લા મધ્યસ્થ સફકારી બેંક લી.

The Banaskantha District Central Co-Operative Bank Ltd.

"Banas Bhavan" Head Office, Deesa Highway, Palanpur-385001

www.banasbank.com, E-mail ID: info@banasbank.com



- 4. My Address given earlier is changed. Please note my new address. (copy of address proof enclosed)
- 5. Please register my mobile number which is in my name and emailid. (Separate application form for registration of mobile number and email id will be available at branch)
- 6. I undertake to do transaction immediately on refund of my balance and also regularly in future.

Yours faithfully,	
Signature & Name	Signature & Name



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