Application for premature closure of account Mahila Samman Savings Certificate, 2023.



To,	
The Manager IDBI Bank Ltd.	Date :
Branch	
Sir,	
	having balance of
	d request you to pay the amount after deduction of applicable penalty, as p
details given below:-	atanding at
Or	standing atBar
Please pay in cash (applicable if the amount is below permissil	ble limit)
2. Thereby declare that the provisions under which the account ca	an be closed before maturity have been complied with.
*Certified,that the amount sought to be withdrawn to be availe	ed is required for the use of
who is alive and still a Minor.	
	Signature or thumb impression of account holder /guardia (Thumb impression of the depositor should be attested
Date:	by a person known to the Bank)
	office use only
Pay	yment detail
Elimitate technical in Assessment	
Eligible balance in Account	
Less Penalty amount	<u> </u>
Total Amount to be paid ₹(In_figur	res)
· · · · · · · · · · · · · · · · · · ·	,
(In words)	_
Date Stamp	Signature of /Manager
·	
A	cquittance
(to be filled by a	ccount holder/ messenger)
(to be fined by at	occurre moracin measenger)
Received ₹ (In figures) (in words)	By cash/cheque/DD bearing
no doted //	by transfer to Account No
noaatea/t	by transfer to Account No
Date :	
Place:	Signature/thumb impression of account holder /guardian

Toll Free Numbers: 1800-209-4324 / 1800-22-1070, **Non-Toll Free Number:** 022 - 67719100

