



FORM – 3
Application for withdrawal

To,
The Manager

.....
.....

Sir,

I(account holder /guardian) hereby apply for withdrawal from my account as per details below:-

Account Number:.....

Amount of withdrawal applied.....

2. Please Credit the amount of withdrawal to my SB Account no. _____standing at _____(Name of Branch).

or

Please issue a Demand Draft/account payee cheque

or

Please pay in cash (applicable if the amount is below permissible limit of cash payment).

3. I certify that all the provisions applicable under scheme for grant of withdrawal have been complied with.

*Certified, that the amount sought to be withdrawn to be availed is required for the use ofwho is alive and still a Minor.

Date:- _____

Signature or thumb impression of account holder/guardian
(Thumb impression of the depositor should be attested by a person known to the bank)

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 Bank Manager

Acquittance

(to be filled by account holder)

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

Date

Signature/thumb impression of account holder/guardian