

**FORM – 4**  
**[See sub-paragraph (3) of paragraph 9]**  
**(Application for closure of account)**

Name of Post Office/Bank \_\_\_\_\_ Date \_\_\_\_\_

Account Number \_\_\_\_\_

1. I hereby submit pass book/deposit receipt book and apply for closure of my above mentioned account.
2. Please Credit the amount of eligible balance in my matured account to my SB Account no. \_\_\_\_\_ standing at \_\_\_\_\_ (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).

\*Certified, that the amount sought to be withdrawn/loan to be availed is required for the use of  
..... who is alive and still a Minor.

Signature or thumb impression of depositor/guardian  
(Thumb impression should be attested by a person known to Accounts office)

**Payment Order**  
(For office use only)

Date .....

**Payment detail**

Principal amount Rs. \_\_\_\_\_

(+) Interest due Rs. \_\_\_\_\_

(-) Recovery of overpaid interest Rs. \_\_\_\_\_

Deduction if any Rs \_\_\_\_\_

Total Amount due Rs \_\_\_\_\_

Pay Rs. \_\_\_\_\_ (in figures) \_\_\_\_\_ (in words)

Date

Signature of Postmaster/Manager

**Acquittance**

(to be filled by depositor)

Received Rs . \_\_\_\_\_ (In figures) \_\_\_\_\_ (in words) By  
cash/cheque/DD bearing no. .... dated ...../by transfer to  
Account No.....

Date

Signature/thumb impression of depositor/guardian