

The Bavla Nagrik Sahakari Bank Ltd.



Annexure-A

REQUESTLETTERFORACTIVATING/CLAIMINGAMOUNTINUNCLAIMED DEPOSIT/INOPERATIVEACCOUNTFOR10YEARSORMORE

	Date:
Account Holder Name :	
Address:	
	<u></u>
Mobile No.:	
Sir,	
Ref:My/OurSB/CA/FDAccountNumber:	
Sub: Activating / Claiming of the amount held und Transferred Account)	ler unclaimed despot/ Inoperative Account (DEAF
more than ten years:	imed on the due date, in view of the following reason for
a) To evidence of having account with your Bank branc	ch we submit the following:
(Any one of the following should be submitted, which sname)	should have the account number and account holder's
, .	used and / or counter foil of the used Cheque leaves 3) account 4) Deposit receipt- in respect of claim towards
b) If you want to change address then please fill below	w details:
OLD ADDRSS	NEW ADDRESS AND MOBILE/PHON NO:

c) I am / We are submitting the following documentary evidences for proof of identity and proof of present address.

For proof of Identity: (In addition to Aadhaar card submit any one document copy along with original for verification)

1) PAN Card 2) Voter ID 3) Passport 4) Driving License 5) Ration Card 6) UIDIs must

For proof of address: (Submit any one document copy along with original for verification 1) EB bill 2) Telephone Bill 3) Bank Account statement 4) Letter from employer

- d) I/We request you to activate the account/pay the amount held under unclaimed deposit to me/us.
- **e)** I/We are aware that if the claim amount is above Rs. 20,000/- only account payee banker's Cheque/Demand draft will be issued in favour of the account holder/s.

(Signature of account holder)

**Witness(i)

**Witness(ii)

Note: (i) In respect of the accounts held under joint names all the account holders' should sign and ID proof and address proof should be submitted for all of them.

(ii)** If account holder/s is /are illiterate and is affixed, that should be witnessed by two persons known to the bank.