FORM - 5

[See sub-paragraph (1) of paragraph 13] (Application for premature closure of account)

To,	
The Postmaster/Mana	ager
Sir,	
U-	
deduction of applicab	ble penalty, as per details given below:-
	dit the amount to my SB Account no standing(Name of Account office).
	or
Please issue a Deman	nd Draft/account payee cheque
	or
Please pay in cash (ap	pplicable if the amount is below permissible limit)
2. I hereby decl complied with.	lare that the provisions under which the account can be closed before maturity have been
Necessary documents	s as applicable are attached as under:-
1.	
2.	
	amount sought to be withdrawn/loan to be availed is required for the use ofwho is alive and still a Minor.
	Signature or thumb impression of account holder /guardian
(Thumb impression o	of the depositor should be attested by a person known to the accounts office)
	For office use only
TTP 11.1.1	Payment detail
700 P	ccount ₹
	₹
Parents No. 10	aid ₹(In figures)
Date Stamp	Signature of Postmaster/Manager
	Acquittance
	(to be filled by account holder/ messenger)
Received Rs.	(In figures) (in words) By cash/cheque/DD bearing
	dated/by transfer to Account
No	
Date:	Signature/thumb impression of account holder /guardian
Place:	