

Declaration: -

- The fund transfer will be governed by the Terms and Conditions given on our website www.Axisbank.com
- I/We understand that as per RBI Circular dated October 14,2010 transfer of funds through electronic mode will be executed only on the basis of the account number of then beneficiary provided while initiating the transaction. Details will be considered basis cheque copy/passbook or statement provided along with the closure form.
- I understand that this facility is available only at select location and banks covered under Electronic Funds Transfer Facility offered by RBI.
- I/We declare that above details are true and correct and the account is in my/our name.
- DD /PO will be issued if mode of remittance is not selected.

Our following standing instruction may be dealt with as per the instruction written there against

Sr No	Particular of Standing Instruction	To be dealt with (Cancel/Transfer to account no

Names and Signature of all applicants: in case of more signatories please use additional form

Sr No	Name	Signature
Authorised Signatory	Munish Joshi	<i>Munish Joshi</i>
Authorised Signatory		
Authorised Signatory		

BANK USE ONLY

Date of Account Opening _____

CVS ☐ ☐ ☐ ☐ (Circle the option to select)

Branch Head Name: _____

Branch Head Employee No. _____ Branch Sol id _____

Branch Head Signature _____

Following has been destroyed

ATM Card Destroyed Y ☐ N ☐

Unused cheque leave destroyed Y ☐ N ☐

In case of company account necessary board resolution obtained Y ☐ N ☐

Following have been delinked from the account

Standing Instruction No _____ Osc No _____ Locker No _____ Demat Account No _____

Approval enclosed for lien removal /charge reversal

Branch Head ☐

Circle Head ☐

Product Head ☐

Certified that this Request letter is complete in all aspect & all relevant documents are obtained &verified Mode of Operation and signature of the A/c. The request may please be processed

Signature _____ Designation _____

Operation Head ☐ Branch Head ☐ S.S No _____

Signature Verified _____

(Name of the employee)

Employee No. _____

Acknowledgment

We acknowledge receipt of Saving/Current account closure form by you in favour of

Name of account holder: _____ Account No.: _____

Branch stamp and sign

Date of Receipt