

REQUEST LETTER FOR ACTIVATING/CLAIMING AMOUNT IN UNCLAIMED DEPOSIT/ INOPERATIVE ACCOUNT

Date:

From:
(Name/s and address* of the Account holder/s)

To:
The Branch Manager,
The Lakshmi Vilas Bank Ltd.,
B/O _____

Sir,

Ref: My/Our Account NO: _____

Reg: Re-activating/Claiming of the amount held under unclaimed deposit/Inoperative Account

I/We were holding a Savings/Current/..... Account bearing number
..... which was not operated/claimed on the due date, in view of the following
reason for more than ten years:

.....

a) To evidence of having account with your Bank branch we submit the following :
(Any one of the following should be submitted, which should have the account number and
account holder's name)

- 1) Pass book /account statement 2) Cheque book (Un-used and/or counter foils of the used
Cheque leaves 3) Counter foil for cash /Cheque remittance made to the account
4) Deposit receipt- in respect of claim towards Term deposit accounts

b) The old address at the time of account last operation and *present address are as under:

OLD ADDRESS	NEW ADDRESS AND MOBILE/PHONE No:

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

For proof of Identity: (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) UID

For proof of address: (Submit any one document copy along with original for verification)

- 1) EB bill 2) Telephone Bill 3) Bank acct statement 4) Letter from employer

- d) We request you to Activate the account/ pay the amount held under unclaimed deposit to me/us.
- e) We are aware that if the claim amount is above Rs. 20,000.00 only account payee banker's Cheque/Demand draft will be issued in favour of the account holder/s.

**Witness (i)

**Witness (ii)

(Signature /LTI of account holder/s **)

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

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

(FOR OFFICE USE)

- Verified the evidences submitted for having account with us and found correct
- Verified the proof of identify document copies with originals submitted and found to be in order
- Verified the proof of address document copies with originals submitted and found to be in order
- Verified the signature/LTI (witnessed by two persons known to the bank) and found to be in order
- Verified the account opening form
- Approved for activating the account/effecting the payment of the amount Rs.....lying to the credit of the above mentioned account to the Claimant/s.

BRANCH MANAGER

Date:

DISPOSAL OF THE CLAIMED AMOUNT

Date of Activation/Disbursement:

- Amount available to the credit of unclaimed deposit account: Rs.
- Amount paid to the account holder/s Rs.
- If the amount is above Rs. 20000.00 DD/BC NO:..... dated..... for Rs.....issued in favour of

CLERK

OFFICER