

## DEA Fund Claim Form

From:

-----(Name of the customer)

-----(Father/Husband Name)

----- (Address of the Customer)

----- (Mobile Number)

To:

The Branch Manager

The Prakasam District Cooperative Central Bank Ltd. Ongole

\_\_\_\_\_ Branch,

Dear Sir/Madam.,

**Sub:** Request for refund of amount transferred to DEA Fund.

I, \_\_\_\_\_ S/o D/o W/o Sri/Smt \_\_\_\_\_ having account (SB/CA/TD) account bearing No.\_\_\_\_\_ with your Branch and having a balance of Rs.\_\_\_\_\_ (Rupees \_\_\_\_\_ Only).

It came to my notice that the said amount/s was/were transferred to DEA Fund with RBI for the reason the account was not operated for more than ten years.

Now, I request you to refund the amount of Rs.\_\_\_\_\_

(Rupees \_\_\_\_\_ Only) which was transferred to DEA Fund with RBI along with eligible interest, if any, as per DEA Fund scheme guidelines.

Further, I furnish the following documents for your perusal and records.

- a) Copy of Aadhaar card, PAN card, Voter ID (Strike off inapplicable)
- b) Original pass book/TDR receipt etc evidencing the amount held in my account.

Yours faithfully,

(Signature of the customer)