ACCOUNT CLOSURE/ FIXED DEPOSIT PREMATURE WITHDRAWAL FORM

IndusInd Bank

A/c No: Date: D D M M Y Y Y Y

Name:

ACCOUNT CLOSURE

Reason for account closure	Payment details for balance in account

I hereby submit following documents related to my account:

1. ATM/ Debit Card	☐	4. Depository account details	☐
2. Unused Cheque leaves	☐	5. Safe Deposit Locker details	☐
3. Resolution for closure (In case of Companies)	☐	6. Cheques under collection, if any	☐

FIXED DEPOSIT PREMATURE WITHDRAWAL

Fixed Deposit No.:

Maturity Proceeds: ☐ Credit to IndusInd Bank Account ☐ Other

Name of the Bank:

Account No.: IFSI Code:

I hereby authorise IndusInd Bank Ltd., to execute the above mentioned requests and update all records linked to my IndusInd Bank Account. I have read all Terms and Conditions applicable and understood the Schedule of Charges (SOC) at www.indusind.com

(In case of Current Account, rubber stamp required)

Signature of 1st holder

(In case of Current Account, rubber stamp required)

Signature of 2nd holder

FOR BANK USE ONLY

Branch Employee Name:

Closure Request A/c:

FD:

ECN Stamp & Signature

Branch Seal

CUSTOMER ACKNOWLEDGEMENT

Date: D D M M Y Y Y Y

Branch Employee Name:

Closure Request A/c:

FD:

ECN Stamp & Signature

Branch Seal

For charges and fees, please refer to our schedule of charges (SoC). Terms and Conditions apply.