

Annexure - Unclaimed Deposits / Inoperative Accounts – Request for refund of amount transferred to RBI Depositor Education and Awareness Fund (DEAF)

Date:

To

The Branch Manager,
Equitas Small Finance Bank Limited,

_____ Branch

Dear Sir/Madam

I/We, the undersigned Mr. / Mrs. / Ms. _____, in the capacity of (please tick any of the below)

- Self
- Nominee
- Legal Heir
- others (please specify) _____

Request for refund of funds, for account(s) held with your Bank

Name of the Deposit Holder/s		
Mode of Operation		
Communication Address		
Account Number		
Type of Account	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> FD/RD <input type="checkbox"/> Cash Credit <input type="checkbox"/> Overdraft <input type="checkbox"/> Loan <input type="checkbox"/> Other	
Transferred to DEAF	Date – / /	Amount -

We/I could not operate the above mentioned account due to the reason of _____

We/I understand that as per guidelines issued by the RBI, ESFB has transferred the amount held in the aforementioned account / name of the holder to the DEAF funds of the RBI.

We/I herewith submitting the documents to the _____ branch to credit our/my account with ₹_____ & to reactivate my accounts. *(Re-Activation applicable on CASA accounts). (In case of other bank transfer, please attach cancelled cheque leaf).*

List of Documents submitted for Photo Identification Proof _____ & Address Proof _____, others please specify _____.

We/I understand that the refunds will be credited post due diligence and authentication of documents as per the Bank’s policy and guidelines.

Yours faithfully,

Name & Signature: _____

Contact Number & Address: _____

Customer Acknowledgment slip (to be filled in by Bank official) Date: ____/____/____ Received request form Customer
_____ for refund of Unclaimed Deposits / Inoperative Accounts

ESFB Bank Branch _____

Signature of Bank Official with Bank Seal _____