

FORM B

[See sub-paragraphs (2), (3) and (7) of paragraph 7]

RBL Bank Ltd.**Application for conversion of accounts under the
Capital Gains Accounts Scheme, 1988**

To

The Branch Manager

RBL Bank Ltd.,

Branch Code: _____ Branch Name & address: _____

I, _____

[Name of the applicant/depositor] hereby apply for transfer of the principal amount of [in figures]

Rs. _____ (in words Rs. _____)

together with the amount of interest accrued in account-B No. _____

(Deposit Receipt No. _____) maintained with your office in my name/the name of

residing at _____

[Name and address of the depositor].**1. (a)** To account-A No. _____, Passbook No. maintained with your office in my name/the name of the aforesaid depositor;**(b)** *To a new account-A which may please be opened in my name/in the name of aforesaid depositor.

I submit herewith the aforesaid Deposit Receipt No. _____ (for the purpose of transfer of said amount to aforesaid account-A which is maintained with your office/which is to be opened.

2. (i) Opening a new account-B in my name/in the name of _____

residing at _____

[Name and address of the depositor] for a period of _____ days/month/year with effect from **DD / MM / YYYY** and to transfer the sum of [in figures] Rs. _____ (in words Rupees _____)

to the credit in such new account-B, out of the balance standing to the credit in account-A No. _____ . (Pass book No.), maintained with your office in my name/in the name of the said depositor _____

[Name of the depositor].

(ii) I submit herewith the aforesaid pass book No.for the purpose of transfer of said amount to a new account-B.

3. The application is made by me as guardian on behalf of aforesaid _____ **[Name of the depositor]** who is a minor.

4. The application is made by me as karta of the aforesaid _____ Hindu undivided family.

5. The application is made by me as authorised officer of the aforesaid firm _____ / _____ company/ association of persons/body of individuals.

<i>Signature/Thumb impression of the Depositor/the Guardian/Karta/ Authorised Officer of the Depositor</i>	
<i>Additional specimen</i>	
Date:	Place:

FOR THE USE OF DEPOSIT OFFICE

1. The deposit in aforesaid account-B No. _____ Deposit Receipt
No. _____ has been allowed to be withdrawn before Maturity/on
maturity/after maturity and total sum of **principal amount** [in figures] Rs. _____
(in words Rupees _____)
and sum of Rs. _____ (in words Rupees _____)
_____)

of **interest accrued** in said account-B No. _____ has been transferred
on **DD / MM / YYYY** to account-A No. _____ pass book No.
_____ which is already maintained/which has been opened on **DD / MM / YYYY**,
in the name of the aforesaid depositor _____

and the passbook No. _____ of the newly opened account-A No.
_____ has been delivered on **DD / MM / YYYY** to the above
mentioned *applicant/*depositor.

2. A new account-B No. _____ deposit receipt No. _____
for sum of [in figures] Rs. _____ (in words Rupees _____)
_____)

has been opened on **DD / MM / YYYY** for a period of _____ days/month/year/s in
the name of aforesaid depositor _____

[Name of the depositor] and the sum of [in figures] Rs. _____ (In
words Rupees _____)
_____)

has been transferred to said new account-B No. _____ on **DD / MM / YYYY**
out of the balance standing to the credit in the aforesaid account-A No. _____
of the said depositor.

Branch Official Details (SDM Or above)	
Name	
Employee ID	
Signature	
Designation	
Date	DD / MM / YYYY

Notes:

1. Score out whichever is not applicable.
2. If space provided in a column or columns is not sufficient to furnish the requisite details, same may be furnished by way of using separate enclosure and referring the same under the respective column.