

Serial No.

## FORM C

[See sub-paragraph (1) of paragraph 9]

Affix branch barcode

### Application for withdrawal of amount from account-A under the Capital Gains Accounts Scheme, 1988

To,  
The Manager  
IndusInd Bank,

Branch

I,  son of   
[Name of the \*Applicant/\*Depositor]

residing at   
  
[Address of the \*applicant/depositor]

wish to withdraw a sum of ₹  (Rupees  ) [in figures] [in words]

from the account-A No.  (pass book No.  ) maintained

with your office, in \*my name/\*the name of   
  
  
[Name & address of the depositor]

**2.** I hereby declare and confirm that the amount sought to be withdrawn is proposed to be utilised in terms of the provisions of \*section 54/\*section 54B/\*section 54D/\*section 54F/\*section 54G/\*section 54GB of the Act for the following purposes.

- \*\* (i) \_\_\_\_\_
- (ii) \_\_\_\_\_
- (iii) \_\_\_\_\_
- (iv) \_\_\_\_\_
- (v) \_\_\_\_\_
- (vi) \_\_\_\_\_
- (vii) \_\_\_\_\_

**3.** I request you to please pay the aforesaid amount of withdrawal in the following manner:

\* (i) Amount of ₹ [in figures]  (Rupees  ) [in words]

may be paid in cash for the purposes mentioned at Serial No.  of column 2 hereinabove;

\* (ii) Amount of ₹ [in figures]  (Rupees  ) [in words]

may be paid to.   
[Name and address of the party to whom payment is to be made]

by way of Pay Order/Demand Draft for the purposes mentioned at Serial No.  of column 2 hereinabove.

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

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

**6.** The application is made by me as karta of the aforesaid depositor  Hindu undivided family.

Date:

Place:

\_\_\_\_\_  
\*Signature/Thumb \*impression of the depositor  
\*of the \*Guardian/\*Karta/\*Authorised Officer of the depositor

Additional specimen:

