AXIS BANK	Savings/Current Ac (All fields ar	re mandatory)	
Account number:		Da	ite: [ D _ D _ M _ M _ Y _ Y _ Y _ Y _ Y
Name of the Prefix account holder:	First Name	Middle Name	Last Name
Reason for Closure of Account (pl	ease select any one reason)		
<ol> <li>Deficiency in Branch Services</li> <li>Monthly/ Quarterly/ Half yearly chat</li> <li>Shifted to other location where the</li> <li>Monthly/ Quarterly/ Half yearly bal</li> <li>Dissatisfied with the present produced</li> </ol>	re is No Axis Bank ance on higher side	Opening the account in	Nationalise/ Co-operative Bank n some different scheme code ge in constitution/ Legal case
Desired Mode for Receipt of Close	ure Proceeds		
Please select desired mode of remitta	nce for receiving closure proceeds	S.	
1. NEFT/RTGS Account Type:	A) 🗌 Resident Savings Account	B) NRI: 🗉 NRE 🛛 NRO 🛛 🗌	Current Account
Bank Details:			
Other Bank Account No: Reconfirm Bank Account No: Name of the Account holder:	First Name	Image: Image of the second	Last Name
<sup>2.</sup> To Another Axis Bank Account:			
L. The fund transfer will be governed by th October 14,2010 transfer of funds throu nitiating the transaction. 3. I understand t by RBI. 4. I/We declare that above details	Declar e Terms and Conditions given on our gh electronic mode will be executed hat this facility is available only at sele are true and correct and the account	ration website www.Axisbank.com. 2. I/We un l only on the basis of the account num! ect location and banks covered under Ele : is in my/our name. 5. Standing Instructi	derstand that as per RBI Circular date per of then beneficiary provided whi ectronic Funds Transfer Facility ordere ion/ Demat Account/ Locker/ OSC, S
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