

**Form-II**  
**(Proforma of Claim form)**  
**From: (Address of the depositor)**

To,  
The Branch/Chief Manager  
Mizoram Rural Bank  
\_\_\_\_\_ Branch.

Dear Sir,

**CLAIM REQUEST LETTER UNDER DEAF SCHEME:**

I, \_\_\_\_\_ S/o. Shri \_\_\_\_\_ having account (SB/CA/TD) account bearing No. \_\_\_\_\_ with your Branch and having a balance of Rs. \_\_\_/- and it is not operative since \_\_\_\_\_.

2. Reasons for not operating: \_\_\_\_\_.

3. Now, I propose to operate my account, I furnish the following documents for your consideration.

- a) The KYC essentials copy of identity proof address proof
- b) Copy of Adhaar card
- c) Original pass book/TDR receipt etc evidencing the amount held in my account.
- d) Copy of Passport/PAN card

4. I request you to permit me/us to operate my account with your branch. Yours faithfully,

(Signature of the customer)