



SOVEREIGN GOLD BOND CUSTOMER REQUEST FORMAT

From, Name..... Address.....	To, The Branch Manager Canara Bank Branch :
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Dear Sir/Madam,

Sub:: Request for Premature Closure of Sovereign Gold Bond Certificate

Investor ID :

SGB Certificate No 1:

SGB Certificate No 2:

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With reference to the captioned subject, I hereby request you to prematurely close the above mentioned Sovereign Gold Bond Certificate purchased dated.....The closure proceedings to be credited to the below mentioned account details. Previous SGB interest has been credited into my bank account before premature SGB closure.

Account Holder Name	
Bank Name	Canara Bank/.....
Account Type*	Savings Account /Current Account
Account Number	
IFSC Code	

Place :

Date : ___/___/_____

Signature of the SGB Holder/s

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FOR OFFICE USE

Investor ID	
SGB Certificate No's	
Account Holder Name	
Account Type	Savings Account /Current Account
Account Number	
IFSC Code	

We have verified the details provided by the customer and recommend to close the above mentioned SGB certificate prematurely. The required documents attached.

Place :

Date : ___/___/_____

Signature of the Branch Head with Seal

Internal