

Unclaimed Balances of Inoperative Prepaid Payment Instruments – Claim Form

Date: ___/___/___

The Branch Head
Axis Bank

_____ Branch

Dear Sir/Madam,

I/We, the undersigned Mr. / Mrs. / Ms. / Dr. _____
in the capacity of:

Self Nominee Legal Heir Others (please specify) _____

Request for settlement of claim, for Prepaid account(s) held with your Bank in the name(s)
of Mr./ Mrs. / Ms. / Dr. _____

Claim Details

Name of the Prepaid Card/ Account Holder: _____

Communication Address: _____

I understand that the claim will be settled post due diligence and authentication of documents as per the Bank's policy and guidelines.

Yours faithfully,

Signature: _____

Name: _____

Address: _____

Contact No: _____

Customer Acknowledgment slip (to be filled in by Bank official) Date: ___/___/___

Received a request form Mr. / Mrs. / Ms. / Dr. _____,

for claiming Unclaimed Balances of Inoperative Prepaid Accounts

Type of Account: Prepaid Payment Instrument / Finacle Prepaid Bank Account / INR Prepaid Card
number / Other (if any)

Product Name _____

Option to claim: Card Issuance (Replacement)/ Fund Transfer/DD to Bank account

Axis Bank _____ Branch

Signature of Bank Official with Bank Seal