FORM -6

(See Rule 4 of Government Savings Promotion Rules, 2018)

Application for extension of account under National Savings Scheme

To, The Postmaster/Manager

Sir,

| 1. l/we | | am/are | depositor of Account |
|------------------|------------------------------------|-------------|-------------------------|
| Number | under | | (Name of scheme) in |
| your office. The | e said account was opened on | | and has/will mature |
| on | for payment. We hereby request fo | r extensior | n of the account for a |
| further period o | of years (as per scheme rule) from | the date of | f maturity of the above |
| said account i.e | e | | |

2. I/We have understood the terms and conditions applicable to the account during the period of extension under the said scheme as amended from time to time and shall abide by them.

Date

Signature of the Depositor/s

Place

(Name and address)

For the use of Accounts Office

| | The | account | nc | | | | which | was | opene | ed o | n | | with |
|--------|-------|---------|-------|--------|-------|-------|--------|--------|---------|------|---|--------|------|
| Rs | | | | | | (Rup | ees | | | | | |) |
| under_ | | | | (Nar | ne of | schem | e) and | mat | ured or | ז | | ·····, | has |
| been | exten | ded for | а | period | of _ | | years | with | effect | fron | n | | . to |
| | | unde | er ru | le | of th | 1e | | .schei | me. | | | | |

Necessary entries have been made in the records and pass book/deposit receipt/ statement of account.

Signature of Postmaster/Manager

Date

Seal