

FORM B

[See sub-paragraphs (2), (3) and (7) of paragraph 7]

[Name of the Deposit Office]

Serial No. _____

Application for conversion of accounts under the Capital Gains Accounts Scheme, 1988

To
The Manager

[Name and address of the Deposit Office]

I, _____ [Name of the applicant/ * depositor], hereby apply for transfer of the principal amount of Rs. _____ [in figures] (Rs. _____) [in words] together with the amount of interest accrued in account-B No. _____ (Deposit Receipt No. _____) maintained with your office in * my name/ * the name of _____ [Name and address of the depositor]

- 1. (a) * To account-A No. _____, Pass book No. _____ maintained with your office in my name/ * the name of the aforesaid depositor ;
- (b) * To a new account-A which may please be opened in my name/ * in the name of aforesaid depositor.

I submit herewith the aforesaid Deposit Receipt No. _____ (for the purpose of transfer of said amount to aforesaid account-A which * is maintained with your office/ * which is to be opened.

- * 2. (i) Opening a new account-B in * my name/ * in the name of _____ [Name and address of the depositor] for a period of _____ days/month/year with effect from _____ [date] and to transfer the sum of Rs. _____ [in figures] (Rupees _____) [in words] to the credit in such new account-B, out of the balance standing to the credit in account-A No. _____ (Pass book No. _____), maintained with your office * in my name/ * in the name of the said depositor [Name of the depositor]

(ii) I submit herewith the aforesaid pass book No. _____ for the purpose of transfer of said amount to a new account-B.

- 3. * The application is made by me as guardian on behalf of aforesaid _____ [Name of the depositor] who is a minor.
- 4. * The application is made by me as karta of the aforesaid _____ Hindu undivided family.
- 5. The application is made by me as authorised officer of the aforesaid * firm _____ / * company/ * association of persons/ * body of individuals.

* Signature/Thumb impression of the Depositor/the Guardian/Karta/ Authorised Officer of the Depositor

Date : _____
Place : _____

Additional specimen

FOR THE USE OF DEPOSIT OFFICE

- * 1. The deposit in aforesaid account-B No. _____ Deposit Receipt No. _____ has been allowed to be withdrawn * before maturity/ * on maturity/ * after maturity and total sum of principal amount Rs. _____ [in figures] (Rupees _____) [in words] and sum of Rs. _____ [in figures] (Rupees _____) [in words] of interest accrued in said account-B No. _____ has been transferred on _____ [date] to account-A No. _____ a pass book No. _____ * which is already maintained/ * which has been opened on _____ [date], in the name of the

aforesaid depositor _____ * and the pass book No. _____ of the newly opened account-A No. _____ has been delivered on _____ [date] to the above mentioned * applicant/ * depositor.

* 2. A new account-B No. _____ deposit receipt No. _____ for sum of Rs. [in figures] (Rupees _____) [in words] has been opened on _____ [date] for a period of _____ days/month/year/s in the name of aforesaid depositor [Name of the depositor] and the sum of Rs. _____ [in figures] (Rupees _____) [in words] has been transferred to said new account-B No. _____ on _____ [date] out of the balance standing to the credit in the aforesaid account-A No. _____ of the said depositor.

Date : _____

Officer-in-charge

Notes:

1. *Score out whichever is not applicable.
2. If space provided in a column or columns is not sufficient to furnish the requisite details, same may be furnished by way of using separate enclosure and referring the same under the respective column.