WEBSITE:	kbank.com/	ikbank ne
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Unclaimed Deposits/Inoperative Accounts Claim Form The Business Unit Head J&K Bank Dear Sir/Madam I/We, the undersigned Mr. / Mrs. / Ms. / Dr	/settlement of claim, for ith your Bank in the names(s)
Unclaimed Deposits/Inoperative Accounts Claim Form The Business Unit Head J&K Bank Dear Sir/Madam I/We, the undersigned Mr. / Mrs. / Ms. / Dr	Space for Photograph for self \(\sigma \) Self
request for activation of SB/CD account noheld wof Mr./ Mrs. / Ms. / Dr	for Photograph for self \(\sigma \) Self /settlement of claim, for with your Bank in the names(s)
Unclaimed Deposits/Inoperative Accounts Claim Form The Business Unit Head J&K Bank Dear Sir/Madam I/We, the undersigned Mr. / Mrs. / Ms. / Dr	for Photograph for self \(\sigma \) Self /settlement of claim, for with your Bank in the names(s)
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Dear Sir/Madam I/We, the undersigned Mr. / Mrs. / Ms. / Dr	/settlement of claim, for ith your Bank in the names(s)
I/We, the undersigned Mr. / Mrs. / Ms. / Dr	/settlement of claim, for ith your Bank in the names(s)
& on behalf of Others (please specify)* request for activation of SB/CD account no	/settlement of claim, for ith your Bank in the names(s)
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request for activation of SB/CD account no	/settlement of claim, for ith your Bank in the names(s)
deposit account(s)————————————————————————————————————	ith your Bank in the names(s)
Of Mr./ Mrs. / Ms. / Dr	70 (0.00)
Claim details Name of the Deposit Holder/s : Address :	5 <u></u> 8
Name of the Deposit Holder/s :Address :	
Address :	
Type of Account	
Account Number	
I understand that the claim will be settled post due diligence and	authentication of documents
as per the Bank's policy and guidelines.	authorities of accomments
as per the same spone, and Baracines.	
Yours faithfully,	
Signature:	
Name::	
Address :	
Contact No.:	
Customer Acknowledgment slip (to be filled in by Bank official)	Data: / /
Received a request form Mr. / Mrs.	Date:/// / Ms. / Dr.
면 있어요. 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전	ion of /claiming Unclaimed
Deposits	ion of following officialities
B.Unit Signature of Bank C	

^{*} As per mandate for account operations.