



MWS HAKIMI QARZAN HASANA TRUST

Trust Regn No: E-27186 (Mumbai)

704, 7th Floor, Eiffel Tower, 16 Nesbit Road, Mazgaon, Mumbai – 400 010.

Tel: 9820450153/ 9820750152 email: mwshqht@gmail.com

APPLICATION FOR ACCOUNT CLOSURE

I / We / M/s, _____ having an account with the MWS Hakimi Qarzan Hasana Trust wish to close my/our account due to _____

My/Our Account Details are as under:

Full Name : _____

Address : _____

A/c No : _____ Mobile No.: _____

Kindly issue cheque in my/our banking name as follows

I/We acknowledge that any dues that may be due, including any qarzan hasana dues, will be deducted from the balance to my credit.

I/We also understand that after the account closure, it will not be re-opened or resumed in future.

Thanking you,

Encl: Account Passbook/s

Applicant's Signature

(Rubber Stamp if Applicable)

FOR OFFICE USE

Last Year Balance	Current Year Savings	Withdrawals /Adjustments	Balance Saving As on Date	Q.H. Details	Q.H. Guarantee Details

Accepted / Rejected

Office in Charge

Secretary / Trustee

RECEIPT

Received from the MWS Hakimi Qarzan Hasana Trust the sum of Rs. _____ (Rupees _____ only) vide cheque no. _____ dt. _____ drawn on _____ towards withdrawal of my/our saving on closure of my/our account no. _____

