



Annexure III

**LETTER OF AUTHORITY (LOA)
TO OPERATE THE NON-RESIDENT ACCOUNT**
(This facility is available for SB-NRO/NRE Accounts)

The Branch Manager
Saraswat Co-op.Bank Ltd.,

Date:

Dear Sir/Madam,

MY/OUR NON-RESIDENT SAVINGS BANK _____(type) ACCOUNT NO. is _____.
WITH YOU.

I/We hereby authorise you to honour all cheques/withdrawals drawn on the above account with the Bank, provided such cheques/withdrawals are signed by Mr./Mrs./Miss _____ whose signature/s duly confirmed by me/us is/are given below provided adequate balance is available in my/our account/s.

The aforesaid Mr./Mrs./Miss. _____ is my Father/Mother/close relative ('close relative' means Husband, Wife, Brother or Sister or any lineal ascendant or descendant of the Individual) _____ (please specify) and he/she is authorised to operate the above account on my/our behalf, ONLY FOR LOCAL DISBURSEMENTS as per the rules governed by the Foreign Exchange Management Act (FEMA) 1999 / Reserve Bank of India guidelines issued there-under from time to time.

This letter of authority is not applicable for the purpose of investments in India / repatriation of funds on my/our behalf.

Specimen Signature/s & Photographs of letter of authority holder(s)



Yours faithfully,

Signatures of the Account holder/s

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Photo Identity Proof of LOA holder

Address Proof of LOA holder

FOR BRANCH USE

Letter of Authority No. _____ (Authorised Signatory) _____

Name: _____

Recorded on: _____

Designation: _____