DEPARTMENT OF INLAND REVENUE

.42754 ...

To :	The Manager	
	National Savings Bank	
	[Branch
Account No.		
Year of Assessment	:	
	DECLARATIO	ON (BY SENIOR CITIZENS)
I,		
		(Full Name)
of		(Address)
hereby declare that:		
I am a resident and a	senior citizen of Sri Lank	ka (as per the provisions of the Inland Revenue Act No. 24 of
2017)		
this account o	or any other account of	me for the above year of assessment on the monies deposited in this bank or any other accounts in any other bank or any other d Rs. 1,500,000/ Therefore, please refrain from deducting e on this account.
together with account in ar interest for the	the total interest received	vable by me on the monies deposited in the above account able by me from any other account of this bank and of any other other financial institution may exceed Rs. 1,500,000/- of total sment. Therefore, please withhold the tax on the excess of the
availed by m accounts of the	e in respect of the inte	Rs. 1,500,000/- which is available to senior citizen has been erest receivable by me on the monies deposited in the other or other financial institutions. Therefore, please withhold tax on m this account.
National Identity Ca	rd No. :	
Tax payer Identifica	ation No. :	
I certify that the abov	ve declaration made by m	ne is true and correct.
* Any changes to m	y residence status will	be notified to the bank at the time of such change.
Date		Signature of the Declarant
(* Please mark "X" in	appropriate cage)	

(* Please mark "X" in appropriate cage)