

Application Form for Settlement of Claim of Deceased Constituents (Applicable for Resident/Non-Resident)

Instructions for filling the Application form for payment of balances in accounts, articles in safe deposit locker and safe custody in cases other than Nomination or Joint Account with survivor clause)

1. Mention name of the deceased and date of expiry. In case person is missing/not traceable (i.e., whereabouts of person is unknown for more than 7 years an order/certificate of legal death/presumption of death may be issued by Court) mention date since missing.
2. Mention all deposit as well as loan/overdraft accounts of the deceased. The actual amount of claim with accrued interest will be worked out on the date of payment. Similarly, give detail of safe custody locker and safe custody account/receipt no. of the deceased.
3. Select whether claim is made without legal representation (person died intestate) or with legal representation (i.e. Will/ Succession certificate/ Letter of administration). Copy of the same to be enclosed. In case of legal representation, no declaration from independent person mentioned at point 5 is required, except for KYC/proper identification of beneficiaries.
4. (a) to (f) -Detail of the deceased to be provided. Submit copy of Death certificate and Original for verification. The assets of deceased shall be settled to the legal heirs as per the Personal Law of succession (Hindu, Muslim, Christian or any other community) applicable to the depositor.
(g) Mention particulars of all legal heirs along with age and address. In the last column, mention 'Yes' for heirs who are executing Letter of Disclaimer (As per Annexure-A) duly stamped and executed. Otherwise, mention 'No'.
(h) Mention name of legal heirs, who are minors along with Natural/ Legal Guardian. If Legal Guardian is appointed, a copy of the order must be enclosed.
5. Declaration to be signed by an independent person well known to the family of the deceased but unconnected with it and acceptable to the Bank, or any account holder of the Bank known to the family of the deceased but unconnected with it, or Any Govt. Official whose signature is verifiable by the Bank. Where the amount of the claim for balances exceeds threshold limit, the person furnishing the declaration will have to execute an affidavit as per the format. (Annexure – B) before a "Judge / Magistrate / Notary". The affidavit will be stamped according to the Stamp Act in force in the respective State. This declaration is not required in case of legal representation.
6. The detailed information on the sureties, to arrive at their worth, is to be furnished in a separate form (Annexure-D). Sureties, who are the relatives of the deceased, may be accepted, provided they are not directly involved as claimants and are considered individually or jointly good for the amount involved. If one surety is considered good for the amount by the Bank, second surety is not necessary. The sureties have to sign the Letter of Indemnity along with Claimants as per format enclosed (Annexure – C). The Letter of Indemnity will be stamped according to the Stamp Act in force in the respective State.
7. To be signed by all the claimants other than those who have relinquished their right in the property by furnishing a "Letter of Disclaimer" as per the format enclosed (Annexure – A) and will be stamped according to the Stamp Act in force in the respective State.
(Please note that the claimants will have to sign the receipt for having received the claim amount where proceeds are paid by way of Bankers Cheque).
8. **For Non-Resident Depositor/Claimant**
A) In case the Depositor is Non-Resident, and has passed away abroad, the death certificate which is attested /certified by any of the following shall be accepted for processing the claim:
 - i)) Notary Public in that country.
 - ii) Indian Embassy / High Commission in that country.
 - iii) Bank's Foreign Office. (wherever it is possible/permissible to do attestation as per local regulations)
 - iv) Embassy/High Commission of that Country in India.

A death certificate accompanied by any of the following document as a corroboratory evidence, confirming incidence of death shall be accepted as such:

- i. Evidence of settlement of an insurance claim at foreign centre on account of death of the account holder.
- ii. Evidence of settlement of proceeds of bank accounts at foreign centre on account of death of the account holder.
- iii. Evidence of settlement of terminal benefits by the employer at foreign centre on account of death of the

account holder. However, the employer would have to be a government/multilateral organisation only.

iv. Evidence of death as provided by a hospital or local police authorities at the foreign centre.

However, it may be ensured that any of these documents are issued from the same country as the death certificate.

B) In case Claimants(NRIs or Foreign Nationals) stay abroad and it is not possible for them to come to India for completion of formalities-

i) Execute the documents abroad in the presence of officials of Bank's foreign offices

ii) Execute the documents in the presence of Indian Embassy officials. The said document shall be submitted to the Stamp authorities for payment of stamp duty after it reaches India.

iii) The claimant can appoint his attorney for obtaining proper legal representation and obtain payment against affidavit, indemnity, surety etc. The procedure for the same is that the claimant should execute valid Power of Attorney (POA) which is attested by the Indian Embassy officials.

C) The assets of deceased NRI account holder should be settled to the legal heirs as per the Personal Law of succession (Hindu, Muslim, Christian or any other community) applicable to the depositor. This is irrespective of whether the claimants happen to be a resident Indian, NRI, PIO or a foreign national.

(However, if any court order/legal representation is obtained, the proceeds should be settled as ordered by Court. In the case of a foreign court order, ancillary orders/resealing should be obtained from Indian Court u/s 228 of the Indian Succession Act.)

D) Foreign nationals cannot be accepted as sureties while obtaining Letter of Indemnity as he / she will not be governed by Indian law.

E) In case of legal representation-

i) Will probated by Indian Court- Same as in resident case.

ii) Will probated by Foreign Court- properly authenticated copy of the will issued by Foreign Court is to be produced in the Courts of India who can then grant Letters of Administration.

iii) Succession Certificate/ Certificate of inheritance / Letter of Administration by Indian Court- No additional due diligence except for KYC/proper identification of beneficiaries

iv) Succession Certificate/ Certificate of inheritance / Letter of Administration by Foreign Court –

a) If issued by a Superior Court of a Reciprocating Territory(as notified by Central Govt in Official Gazette) Claimants to obtain a grant from competent District Court in India for executing the certificate.

b) In case, where such certificate is not issued by a Superior Court of Reciprocating Territory, Claimant may be advised to file an application before appropriate District Court in India for issuing a separate Certificate (afresh) by producing the Certificate issued by the Foreign Court.

v) If Succession Certificate does not mention the Bank account for which claim is being made- It will be treated as claim without legal representation and to be acted upon accordingly.

9. Classification of claim based on amount of claim: The documents to be submitted is different for claim amount (Principal + Interest) up to threshold limit and for claim amount above threshold limit. The threshold limit will be advised by the concerned Bank. The claim amount will be reckoned on the date of payment, for obtaining required documents.

10. Missing Person: Claims up to a threshold limit (to be advised by the concerned Bank) will be entertained without insisting for valid death certificate. All such claims in respect of missing persons, reported missing for a minimum period of one year, shall be settled on production of the following documents.

1. FIR 2. Non-traceable report issued by the police authorities. 3. Indemnity from the claimant.

The claims in respect of missing person above threshold limit will be settled as per the existing instructions i.e. after getting court order from the competent court.

11. Safe Deposit Locker:

Access may be given to the legal representative of the deceased. In such cases death certificate and proof of the legal representation shall be obtained. The legal representation would be in the form of Probate or Letters of Administration.

12. List of documents to be submitted with Claim Form: For claim up to threshold limit

Copy of Death Certificate

Photograph & KYC of all claimant(s)/legal heirs, Person furnishing declaration or Affidavit & Surety(ies).

Letter of Disclaimer(Duly stamped & Notarised)Annexure-A, Letter of Indemnity (Duly stamped) Annexure-C

Receipt from claimants (payment made by issuing a Banker's Cheque)

13. Additional Documents for claim above threshold limit

Affidavit (Duly stamped & Notarised)- Annexure-B

Opinion Report of Surety(ies) -Annexure-D

14. For Safe Deposit Locker/Safe custody

Form of Inventory of Contents of Safety Locker (Annexure-E)

Form of Inventory of articles left in safe custody (Annexure-F)



Application Form for Settlement of Claim of Deceased Constituents for payment of balances in accounts, articles in safe deposit locker and safe custody in cases other than Nomination or Joint Account with survivor clause
(Applicable for Resident/Non-Resident)

Bank:

Branch:

To,
The Branch Manager,

Address for correspondence

Shri / Smt / Kum _____

Address: _____

Contact No. _____

Email ID _____

Date: _____

Madam / Dear Sir,

Claim for Payment of Balances in the account (s) and delivery of articles in safe deposit locker/safe custody of Late Shri / Smt / Kum. _____ expired on _____

I / We advise that Shri / Smt / Kum _____ expired on _____ / is missing/ not traceable since _____.

2. Late Shri / Smt / Kum. _____ was maintaining following Accounts / safe deposit locker /safe custody articles in your Branch:

No.	Nature of Deposits	Account No.	Amount *	Date of Maturity	Nature of Liability to the Bank, if any	Amount
1.						
2.						
3.						
4.						
	Total Amt.				Total Amt.	

*(the actual amount of claim with accrued interest will be worked out on the date of payment.)

b. Safe Deposit Locker No. _____ mode of Holding _____

c. Safe Custody Article Receipt No. _____

Details of Articles: _____

3. I/We lodge my / our claim for the above balances with accrued interest/articles in safe deposit locker /safe custody of the above-named deceased in terms of: **(Select which is applicable)**

of the late Shri / Smt / Kum _____ dated _____ and a probate granted by the court of _____ at _____ dated _____ **(Copies enclosed).**

■ Succession Certificate dated _____ granted by the Court of _____ at _____
(Copy Enclosed).

■ Letter of Administration No _____ dated _____ issued by _____ at _____
(Copy enclosed).

■ The deceased died intestate. I/We lodge our claim without a legal representation for payment as per the Bank's rules & discretion.

4. I/We furnish below the required information about the deceased & the legal heirs in this regard: -

(a) Date & Place of Death _____

(b) Details of Death Certificate No. _____ dated _____ Authority _____ (copy enclosed).
(Original to be produced for verification.)

(c) Age _____ Yrs.

(d) Marital Status- Married / Unmarried/ Widow(er)

(e) Permanent Address—

H No./Flat No. _____ Street Name _____ Locality/Village _____

City/District _____ State _____ PIN _____

(f) Religion _____ Which law of succession is applicable _____
(Hindu, Mohamedan etc)

(g) Name (s), Relation (s) & age (s) of the legal heirs of the deceased:

S No.	Name	Age	Relation	Address	Whether executing Letter of Disclaimer (Yes/No)

(h) Name (s) of the Minor (s) & Natural Guardian (s) / Legal Guardian (s) of minors amongst the claimants.

SNo.	Name of the Minor Claimant(s)	Date of Birth	Name of the Guardian	Relationship with Minor	Whether executing Letter of Disclaimer (Yes/No)

5. Shri / Smt / Kum. _____ i.e. the person furnishing the declaration below / the affidavit (Annexure "B") knows our family for last _____ years and is unconnected with our family.

I know the deceased and his/her family since last _____ years. The person(s) named above is/are the only legal heir(s) of the deceased entitled to succeed to the estate of the deceased. I am not related in any manner whatsoever to the deceased or any of the above-mentioned persons mentioned at 4(g) to (h) above, nor have I any claim or interest of whatsoever nature in the estate of the deceased.

Certified that to the best of my knowledge & belief the facts stated above are true & correct

Name in full & Address of the person signing the declaration _____

Place
Signature
Date

6. We propose the following surety(ies): {No surety required for amounts upto threshold limit}

S No.	Name of the Surety	Address	Net Worth (As per Annexure-D)

7. I / We declare that the facts stated above are true and correct to the best of my/our knowledge and belief.

The amount of claim settled including up to date applicable interest may kindly be issued Banker's cheque/ credited to the account standing in the name of _____ /D/O _____ maintained with _____ Bank _____ Branch in India through transfer/ RTGS/NEFT.

Signature (s) of the claimant (s) who will receive the amount/ articles of safe deposit locker/safe custody

S. No.	Name of the Claimant	Signature

Place : _____

Date: _____

Encl: As above.

Note : The Bank is not responsible for any delay in disposal of the claim due to lack of full particulars furnished in this application and may insist on calling for a Legal Representation in case there are disputes among legal heirs & all of them do not join in indemnifying the Bank (Or give letter of disclaimer) or where the Bank has reasonable doubt about the genuineness of the claimant(s) being the only heir(s) of the deceased customer.

(If the space provided is insufficient, please use additional sheet)

FOR OFFICE USE

Recommendation:

I have made necessary inquiries about the claim made by the claimants & satisfied that the claim can be settled. The sureties are waived (Amounts up-to 5,00,000/-)* / Surety/ies offered are acceptable as per Bank's extant instructions.* All the necessary documents have been obtained. The claim may be paid to the claimants.

*(Strike out if not applicable)

Any other remarks:

Place: -----

Signature

Date -----

Name :
Designation:
(Recommending Authority)

Sanction:

Sanctioned payment of Rs. _____ (Rs. _____)
in accounts/ handing over of contents/articles in Safe Deposit Locker/Safe Custody of Late _____
_____ to claimant(s).

Place: -----

Signature

Date -----

Name :
Designation :
(Sanctioning Authority)

Disbursement & Record:

Amount of Rs _____ (Rupees _____)
paid by way of

Banker's cheque No. _____ Dated _____ and receipt obtained.

Credited to claimant's Account No _____ maintained with _____ Branch and
copy of statement of account carrying the relevant entry maintained on record as part of the claim settlement.

Credited to claimant's Account No _____ maintained in India with _____ Bank,
_____ Branch through RTGS / NEFT vide UTR No _____ Dated
_____ and copy of acknowledgement of electronic transfer credit maintained on record as part of the
claim settlement.

Handed over contents/articles of safe deposit Locker/safe custody account/receipt to claimant and
acknowledgement kept on record as part of the claim settlement.

All the documents pertain to this claim settlement have been kept on Branch record.

Place: -----

Signature

Date: -----

Name :
Designation:
(Disbursing Authority)

LETTER OF DISCLAIMER
(To be stamped as per the Stamp Act applicable to the State)

The Branch Manager

Dear Sir,

_____ *Account No _____ in the
 name _____ of
 Shri/Smt./Kum. _____
 Balance _____

With reference to the above account, I/We, the following legal heirs of the late Shri/Smt./Kum. _____

(Name of the deceased account holder), have to advise that we have no interest in the above assets and as such we have no objection to your paying the balance amount lying in the above account(s) with you in the name of the aforesaid Shri/Smt./Kum

_____ **(Name of the deceased account holder)** to Shri/Smt./Kum.

1. _____
2. _____
3. _____
4. _____
5. _____

Such delivery of the payment of the balance in the above account(s) would be completely binding on us and we will not question the Bank's action in so doing if any proceedings. I/We undertake to bind ourselves, our heirs and legal representatives not to revoke the declaration made herein.

Sr. No	Name(s) of the Claimants (who relinquish their rights)	Age(yrs)	Signature

Signed before me this _____ day of _____ 20_____

(Notary
Public/Magistrate)

***fill in here the type of account viz. SB/R.D/Term Deposit, Current etc.**

AFFIDAVIT

(To be stamped as per the Stamp Act applicable to the State)

I/We _____ S/D/O _____
 residing at _____ and
 _____ S/D/O _____ resi
 ding at _____ do hereby
 make oath*/solemnly affirm and say as follows:

That Shri/Smt./Kum. _____ (Name of the
 deceased)hereinafter, referred to as "the deceased" died intestate on _____at

2. That we know the deceased and his/her family since the last _____ years.
3. That at the time of his/her death the deceased left surviving him/her the following persons who according to the law by which they are governed, are the only legal heirs of the deceased entitled to succeed to the estate of the deceased on an intestate succession:

SNO.	Name	Age(yrs.)	Relationship with the deceased

4. That I am not related in any manner whatsoever to the deceased or any of the above-mentioned persons nor have we any claim or interest of whatsoever nature in the estate of the deceased.

5. That we are informed, and we verily believe that the deceased has left certain deposits*/ assets with the _____ Bank _____ branch, to which the above-mentioned persons are entitled to claim.

6. That we are making this solemn declaration sincerely and conscientiously believing the same to be true and with full knowledge that it is on the strength of this declaration that the _____ Bank _____ branch, has agreed at our request to make payment of the amount of the deposits/ to deliver the assets to the above mentioned persons without insisting on production by them of a grant of legal representation to the estate of the deceased from a competent Court.

Sworn*/ solemnly affirmed at this _____
 day of _____ 1. _____
 2. _____

in the presence of _____ before me

*(Delete whichever is inapplicable)Judge / Magistrate / Notary

LETTER OF INDEMNITY

(To be duly stamped as per the Stamp Act applicable to the State)
(Letter of Indemnity with respect to payment of Balance in the Deceased Constituents
Account without production of Legal representation)

To,
The Branch Manager

IN CONSIDERATION of your paying or agreeing to pay us,
**Insert here the names
of the claimants**

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

The sum of Rupees _____ standing at the credit of Saving Bank / Current / R.D Account No. etc. with your Bank in the name of Shri/Smt./Kum. _____ since deceased, without production of Letter of Administration or a Succession Certificate to his/her estate, we

**Insert here the
Names of the
suret(y/ies** _____

do hereby for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally UNDERTAKE AND AGREE to indemnify you and your successors and assign against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred by you by reasons or in consequence of your having agreed to pay / or paying me / us the said sum as aforesaid.

Signed, Sealed and delivered by the above named on this _____ day of _____ two thousand _____.

SIGNED AND DELIVERED by the above named

- 1. _____ 2. _____ 3. _____
- 4. _____ 5. _____

(Heirs/claimants of the deceased)

SIGNED AND DELIVERED by the above named

- 1. _____ 2. _____

(Sureties)

Opinion Report on Surety

1.	Name in Full	
2.	Address	
3.	Academic Qualification	
4.	Age	
5.	Occupation (If employed, please state the name of the employer and since when Employed).	
6.	Present Monthly Income / Salary (Attach a Salary Certificate, if income is by way of salary)	
7.	Total yearly income from all sources	
8	No. of dependents	
9	Personal Assets	
a.	Immoveable Property viz. land / Building / flat etc. give details acquisitions, present value etc.	
b.	Investments (Fixed Deposits, Shares etc. if any)	
c.	Life Insurance Policy	
d.	Other Assets	
e.	Details of Bank Accounts, if any (Name and address of Bankers with Account No (Current / Savings) to be furnished).	
10	Personal Liability if any	
11	Please indicate whether surety is related to claimants	Yes/No
12	Period for which claimants are known	Yrs.

I confirm that all the statements made by me in this application are true and correct and have been made by me.

Place:

Date:

Remarks of the Branch Manager

Signature
(Surety)

Branch Manager

**Form of Inventory of Contents of Safe Deposit Locker
(To be used where there is no nomination or survivorship clause)**

The following inventory of contents of Safe Deposit Locker No. _____ located at _____ Branch of _____ Bank.

* hired by Shri/Smt. _____ (deceased) in his/her sole name.

*hired by Shri/Smt. (i) _____ (deceased)
(ii) _____ jointly
(iii) _____

was taken on this _____ day of _____ 20_____.

SNO.	Description of Articles in Safe Deposit Lockers	Other identifying particulars if any

For the purpose of inventory, access to the locker was given to the legal heir(s)/a person mandated by the legal heir(s) and surviving hirers

- By breaking open the locker under his/her/their instructions.
- Who produced the key to the locker (Delete whichever is not applicable)

The above inventory was taken in the presence of:

Legal heirs of deceased joint hirer(s)/person mandated by legal heirs

1. Shri/Smt. _____
Address _____ (Signature)

Shri/Smt. _____
Address _____ (Signature)

And

Shri/Smt. _____
Survivors of Joint hirers (Signature)
Address _____

Shri/Smt. _____
Address _____ (Signature)

2. Witness (es) with name, address and signature:

Shri/Smt. _____
Address _____ (Signature)

Shri/Smt. _____
Address _____ (Signature)

ACKNOWLEDGEMENT

* I, Shri/Smt. _____ legal heir/mandate holder

* We, Shri/Smt. _____

_____ legal heirs and

Shri/Smt. _____

_____ surviving hirers

Hereby acknowledge the receipt of the contents of the safe Deposit locker comprised in as set out in the above inventory together with a copy of the said inventory.

Shri/Smt. _____
(Legal Heir/Mandate Holder)

Shri/Smt. _____ Signature _____

Shri/Smt. _____ Signature _____

Shri/Smt. . _____ Signature _____

Date & Place _____
(* Delete whichever is not applicable)

**Form of Inventory of articles left in Safe Custody
(To be used where there is no nomination or survivorship clause)**

The following inventory of articles left in safe custody with _____ branch of _____ Bank by Shri/Smt. _____ (deceased) under an agreement/receipt dated _____ was taken on this, _____ day of _____ 20 _____.

SNO.	Description of Articles in Safe Custody	Other identifying particulars, if any

The above inventory was taken in the presence of,
Legal heirs or a person mandated by legal heirs

1. Shri/Smt. _____
Address _____ (Signature)

2. Shri/Smt. _____
Address _____ (Signature)

ACKNOWLEDGEMENT

* I, Shri/Smt. _____ legal heir/mandate holder

* We, Shri/Smt _____

_____ Legal heirs

and

Shri/Smt. _____

_____ Surviving

hirers

Hereby, acknowledge the receipt of the articles kept in safe custody comprised in as set out in the above inventory together with a copy of the said inventory.

Shri/Smt. _____
(Legal Heir/Mandate Holder)

Shri/Smt. _____ Signature _____

Shri/Smt. _____ Signature _____

Shri/Smt. _____ Signature _____

Date & Place _____

(* Delete whichever is not applicable)

**LETTER OF INDEMNITY WITH RESPECT TO DELIVERY OF ARTICLES KEPT IN BANK'S SAFE DEPOSIT VAULT / SEALED BOXES ETC. OF THE DECEASED WITHOUT PRODUCTION OF LEGAL REPRESENTATION
(To be stamped as an agreement)**

To,

In consideration of your delivering or agreeing to deliver to me/us

(Insert here the names of the heir(s) of the deceased)

The articles/properties mentioned hereunder -

Safe Deposit Locker No./Sealed Box in Safe Deposit Account No.	Details of the articles/property	Description	Weight	Value

and held in the name(s) of _____ since deceased, without production of any succession certificate/ letters of administration to his / her / their estate or a certificate from the Controller of Estate Duty to the effect that the estate duty has been paid or will be paid or none is due,

I/We _____ and _____ and _____
(State here the names of the heir(s) of the deceased).

and we _____ and _____
(State here the name of the sureties)

do hereby for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally undertake and agree to indemnify you, the Bank, and its successors and assigns against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against you or incurred by you by reason or in consequence of having delivered or agreed to have deliver to me/us the above mentioned articles/property of the deceased from the safe deposit locker/sealed boxes in safe deposit.

Signed sealed and delivered by the above named on this _____ day of _____ Two thousand and _____.

SIGNED AND DELIVERED by the above named

(1) _____
 (2) _____

(Heirs of the deceased)

SIGNED AND DELIVERED by the above named

(1) _____
 (2) _____
(Sureties)

RECEIPT

Received from _____ Bank _____ Branch
Rs. _____ (Rupees _____ only) by Banker's
Cheque No. _____ dated _____ in favour of
_____ being the balance standing at the
credit of Saving Bank Account/ Current Account/ TDR/ STDR No. _____ in
the name of _____. The balance has been paid to me
as per Bank rules.

Date :
Place:

Signature of Claimant
Name:

Declaration in case funds are settled in favour of Minor

I, _____, father/mother and natural
guardian of _____
_____ hereby certify that the proceeds of
your Banker's cheque No. _____ dated _____ favouring
_____ issued by you in full and final settlement of the balance
in Account No. _____ of Late _____
will be utilized for the benefit of the minor only.

Place:
Date:

(Signature of Guardian)