

Death claim check list & claim form –Liability Accounts Without nomination or survival clause

Settlement of Claims in respect of Deceased Depositors without nomination or survival clause

Check-list of Documents

Annexure-1

3. For cases other than Nomination/Joint Accounts with survivor clause: (For amounts up to threshold limit)	
(i) Application for Deceased Claim (Annexure –2)	
(ii) Copy of Death Certificate	
(iii) Letter of Indemnity signed by claimant(s) (Annexure –3) for amounts up to Rs.1,00,000	
(iv) Legally Valid Will or succession certificate or legal heirship Certificate issued by Tahsildar (succession certificate mandatory for Rs. 5 lakhs and above For lockers-succession certificate mandatory	
4. RECEIPT (Annexure –4)	

Death claim check list & claim form –Liability Accounts Without nomination or survival clause

Annexure - 2

Application for Deceased claim

(To be used for cases other than Nomination / joint account with survivor clause)

From

To

The Branch Manager
..... Bank
_____ Branch

Dear Sir,

Re: **Deceased Account**
Late Shri/Smt.....
Account No(s).....

I/We advise the demise of Shri/Smt. _____ on _____. He/she holds the above account (s) at your branch. The account (s) is/are in the name of -----

I/We lodge my/our claim for the balances with accrued interest lying to the credit of the above named deceased who died intestate. I / we am / are the legal heirs of the above named deceased and lodge my/our claim for payment as per the bank's rules and discretion. The relevant information about the deceased and the legal heirs are as under.

1. Names in full of the parents of the deceased:

Father: _____
Mother: _____

2. Religion of the deceased: _____

3. Details of living (i) Husband (ii) Wife (iii) Children (iv) Father (v) Mother (vi) Brothers (vii) Sisters (viii) Grand Children. If Hindu Joint Family, the name and address of the Karta and Coparceners with their respective ages.

Full Name/Address	Occupation	Relationship with Deceased:	
			Age
(i) _____	_____	_____	_____
(ii) _____	_____	_____	_____
(iii) _____	_____	_____	_____
(iv) _____	_____	_____	_____
(v) _____	_____	_____	_____
(vi) _____	_____	_____	_____

Death claim check list & claim form –Liability Accounts Without nomination or survival clause

4. Name or Names of the Guardian/s of the minor Children of the Depositor : _____
(a) Whether Natural Guardian : _____
(b) Whether Guardian appointed by a Court of Law in India. If so, attach a certified copy or duly attested copy of such Order : _____
(c) In whose custody the Minor/Minors is / are? : _____

5. Claimant/s name/s and address in full : _____
(i) _____
(ii) _____
(iii) _____

I/We submit the following documents. Please return the original death certificate to us after verification:

1. Death Certificate (Original + 1 photocopy) issued by: _____
2. Letter of Indemnity
3. Legally valid Will/Legal heirship certificate/Succession Certificate

We request you to pay the balance amount lying to the credit of the above named deceased toon my/our behalf.

I/We hereby solemnly affirm that the above statements are true and correct to the best of my/our knowledge and belief.

Place: _____ Yours faithfully,

Date : _____ Signature of Claimant(s)

(1) Name of Claimant	Address	Signature
(2)		
(3)		
(4)		
(5)		

Death claim check list & claim form –Liability Accounts Without nomination or survival clause

For office use

We have verified the documents and found the same in order. We recommend that settlement be done to -----
-----,

BOM	BM
ID:	ID
Name	Name
Date	Date

Legal opinion from-----received on-----

Excerpts of the opinion:

Passed for payment in terms of the legal opinion
RH/ZH/CEO
Name:
Date

Annexure – 3

Indemnity format (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 CONSTITUENT’S ACCOUNT
WITHOUT PRODUCTION OF LEGAL REPRESENTATION**

To

The Branch Manager
.....Bank

IN CONSIDERATION of your paying or agreeing to pay me/us,

Insert here the 1) _____
Name(s) 2) _____
Claimants 3) _____
4) _____

The sum of Rupees _____ standing at the credit of Savings Bank/Current/R.D. Account No. etc. _____ with your bank in the name of Shri/Smt./Kum. _____ since deceased, without production of Letters of Administration or a Succession Certificate to his/her estate or a Certificate from the Controller of Estate Duly to the effect that estate duly has been paid or will be paid or none is due I/we do hereby for myself/ourselves and my/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

Death claim check list & claim form –Liability Accounts Without nomination or survival clause

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 AND DELIVERED

By the above named on this _____ Day of _____ two thousand _____

SIGNED AND DELIVERED by the above named

1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____

(heirs /claimants of the deceased)

In consideration of the premises, we the undersigned _____ [Name(s) of Surety(ies)]
_____ jointly and severally guarantee to you, Jana Small Finance Bank., the payment of all moneys due under the aforesaid indemnity by the executants thereof.

Signature.....	Signature.....
Name	Name
Occupation	Occupation
Address.....	Address.....

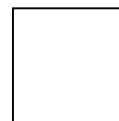
Annexure -4

RECEIPT

Received with thanks from XXX Bank, _____ branch, a sum of Rs. _____ (Rupees _____ only) by Banker's Cheque No. _____ dated _____ in favour of _____ in full and final settlement of my/our claim as successor on the balance in _____ Account(s) No(s). _____ standing in the name of the deceased Shri/Smt/Kum. _____. I/We do not have any other claim from the Bank henceforth.

Place:

Date:



(Signature of all legal heirs)
Over a revenue stamp)

**Death claim check list & claim form –Liability Accounts
Without nomination or survival clause**

DECLARATION in case funds are settled in favour of a Minor

I, ----- father and natural guardian of ----- hereby certify that the proceeds of your Banker's Cheque No----- dated----- favoring ----- issued by you in settlement of the balance in account number ----- of Late-----will be utilized for the benefit of the minor only.