

# Application for Deceased claim

(To be used when account has Nomination or is a joint Account with survivor clause)

From \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

To,

The Branch Manager,  
Abhyudaya Co-op. Bank Ltd.,  
\_\_\_\_\_ Branch

Dear Sir,

Re: Deceased Account / s of Late Shri / Smt. \_\_\_\_\_

Account No (s) \_\_\_\_\_

Claim ₹ \_\_\_\_\_

I/ We advise the demise of Shri / Smt. \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_  
\_\_\_\_\_ He / She holds the above account (s) at your branch. The  
account is in the name (s) of: \_\_\_\_\_

\_\_\_\_\_ with operational instruction : \_\_\_\_\_

## A. In case of nomination

I, Shri / Smt. \_\_\_\_\_ Son / Daughter of  
Shri/ Smt. \_\_\_\_\_ residing at \_\_\_\_\_  
\_\_\_\_\_ am

(i) the registered nominee in the above account (s).

(ii) the person authorized to receive payment on behalf of Master/Miss  
\_\_\_\_\_ who is the nominee. in the  
above account (s) and is a minor as on the date of this claim.

Please settle the balance in the account in the name of the nominee. I receive the payment as trustee(s) of the legal heirs of the deceased.

## B. In the case of joint account

I / We request you to delete the name of deceased person and continue the account in my/ our name(s) with same mode of operations.

I / We submit photocopy of the following document(s) together with originals. Please return the original to us after verification.

Death Certificate issued by : \_\_\_\_\_

Identity proof ( required in nomination cases): \_\_\_\_\_

Yours faithfully,

(Claimant's Photo)

(Claimant (s))

Place:

**Certificate of Identifiers**  
(When account has nominations)

We know the Claimant Shri / Smt. \_\_\_\_\_ and certify that the particulars furnished by him / her regarding Late Shri / Smt. \_\_\_\_\_ are correct.

<u>Name and Address</u>	<u>Occupation</u>	<u>Shareholder M. No. / A/c. No. and Branch</u>	<u>Signature</u>
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1.

2.

**TO BE FILLED IN BY THE BRANCH**

I hereby certify that I have verified the particulars mentioned in the claim form by the claimant / s and have satisfied that the balance outstanding in SB / CD / FDR No. \_\_\_\_\_ of late Shri / Smt. \_\_\_\_\_ is payable to Shri/Smt. \_\_\_\_\_ who is the Nominee as per records maintained by us/to the Legal Heirs. The Identifiers' Account Nos. / Shareholder M. No (s) . are on our Bank's record. The claimant has submitted following Documents.

Sr. No.	Particulars or Documents submitted
1.	
2.	
3.	
4.	
5.	

The proposal is recommended for payment to the Nominee / Legal Heir/s.

**Date:**

**Asst. Accountant / Accountant**

1. The proposal is approved and sanctioned for payment.
2. The proposal is recommended and forwarded to \_\_\_\_\_ for sanction.

**Asst . Gen. Manager / Sr. Manager / Manager**

**Date:**

\_\_\_\_\_ Branch

**ENDORSEMENT BY THE ZONAL OFFICE / HEAD OFFICE**

The proposal to pay the balance of Rs. \_\_\_\_\_ at the credit in Saving Bank / Current Account / Fixed Deposit Receipt No. \_\_\_\_\_ of late Shri / Smt. \_\_\_\_\_ to Shri / Smt. \_\_\_\_\_ who is / are legal heir / s against indemnity bond executed by him / her / them is approved.

The payment may be made after obtaining necessary documents and following usual procedures.

Received at Zonal Office / H.O. on \_\_\_\_\_

Scrutinized by \_\_\_\_\_

Approved & returned to Branch on \_\_\_\_\_

Date: \_\_\_\_\_ Dy. Gen. Manager / Gen Manager / Managing Director

**RECEIPT**

Received with thanks from Abhyudaya Co-op Bank Ltd., \_\_\_\_\_ Branch, a sum of Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_ Only ) by

\*Banker's Cheque No. \_\_\_\_\_ dated \_\_\_\_\_ in favour of \_\_\_\_\_

\_\_\_\_\_ OR

\*Credited to SB / CD A/c No. \_\_\_\_\_ at \_\_\_\_\_ Branch of Abhyudaya co-op. Bank Ltd. in full and final settlement of my / our claim of the balance in Account No (s). \_\_\_\_\_

Standing in the name of the Shri / Smt. / Kum \_\_\_\_\_

I / we am / are aware that I / we / am / are receiving the payment from the bank as a trustee being nominee / legal heir(s) of the deceased depositor. I / We do not have any other claim from the Bank and the Bank hereby stands fully discharged.

Place:

Date:



(Signature of Nominee / Claimant(s)  
over a Revenue Stamp)

**DECLARATION (in case funds are settled in favour of a 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 settlement of the balance in Account No.(s) \_\_\_\_\_ of \_\_\_\_\_ will be utilized for the benefit of the minor only.

# Application for Deceased claim

(To be used for cases other than Nomination/ Joint Account without survivor clause)

From \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

To,  
 The Branch Manager,  
 Abhyudaya Co-op. Bank Ltd.,  
 \_\_\_\_\_ Branch.

Date

Dear Sir,

Re: Deceased Account/s of Late Shri/Smt. \_\_\_\_\_

Account No(s) \_\_\_\_\_

Claim ₹ \_\_\_\_\_ respectively

I/ We advice the demise of Snri/Smt. \_\_\_\_\_ on  
 \_\_\_\_\_ at \_\_\_\_\_ . He/ She holds the above account(s) at your branch.

The account is in the name(s) of : \_\_\_\_\_  
 \_\_\_\_\_ with operational instruction : \_\_\_\_\_

I/We lodge my/our claim for the balance 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: (If deceased, please mention date of death)

Father : \_\_\_\_\_

Mother: \_\_\_\_\_

2. Religion of the deceased : \_\_\_\_\_

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

Sr. No.	Full Name / Address	Occupation	Relationship with the deceased	Age
1.				
2.				
3.				
4.				
5.				

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 originals to us after verification:

1. Death Certified (Original + 1 Photocopy) issued by : \_\_\_\_\_
2. Copy of Identify proof(s) with original (s).
3. Letter of Indemnity / NOC from other Claimants.
4. Affidavit of consent of all the legal heirs.

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

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

Place:

Your Faithfully,

(Claimant's Photo)

Signature of Claimant's

\_\_\_\_\_

Certificate of Identifiers

We know the claimant (s) Shri/Smt. \_\_\_\_\_ and certify that the particulars furnished by him/her/them regarding Legal heirs of Late Shri/Smt. \_\_\_\_\_ are correct.

Name and Address

Occupation

Shareholder M. No./  
A/c. No. and Branch

Signature

1. \_\_\_\_\_

2. \_\_\_\_\_

**TO BE FILLED IN BY THE BRANCH**

I hereby certify that I have verified the particulars mentioned in the claim form by the claimant(s) and being fully satisfied, recommend that the balance of Rs. \_\_\_\_\_ in SB/CD/FDR No. \_\_\_\_\_ of late Shri / Smt. \_\_\_\_\_ is payable to / may be paid to Shri/ Smt. \_\_\_\_\_ who is/are the legal heirs and rightful claimants and who have executed the stamped indemnity bond. Verified that the identifiers Account No.(s) / Shareholder M. (No (s). are on our Bank's record. The Claimant has submitted following documents :

Sr.No.	Particulars of Documents submitted
1.	
2.	
3.	
4.	
5.	
6.	

The Proposal is recommended for payment to the Nominee/Legal Heir /s.

Date : \_\_\_\_\_ **Asst. Accountant /Accountant**

1. The Proposal is approved and sanctioned for payment.
2. The Proposal is recommended for sanction of Zonal Office / Head Office.
3. Sent to Zonal Office / Head Office on \_\_\_\_\_

Date : \_\_\_\_\_ **Manager / / Sr. Manager/ Asst. Gen. Manager**  
\_\_\_\_\_ **Branch**

**ENDORSMENT BY THE ZONAL OFFICE / HEAD OFFICE**

The proposal to pay the balance of Rs. \_\_\_\_\_ at the credit in saving Bank/ Current Account / Fixed Deposit Receipt No. \_\_\_\_\_ of late Shri/Smt \_\_\_\_\_ to Shri/ Smt \_\_\_\_\_

Who is / are legal heir /s against indemnity bond executed by him / her / them and affidavit of consent of other legal heirs, is approved subject to \_\_\_\_\_

The payment may be made after obtaining necessary documents and following usual procedures.

Received at Zonal Office.H.O. on \_\_\_\_\_

Scrutinized by \_\_\_\_\_

Approved & returned to Branch on \_\_\_\_\_

Date : \_\_\_\_\_ **Dy. Gen. Manager/ Gen. Manager/ Managing Director**

## RECEIPT

Received with thanks from Abhyudaya Co-op Bank Ltd., \_\_\_\_\_ Branch,  
a sum of Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_ Only )

\*Banker's Cheque No. \_\_\_\_\_ dated \_\_\_\_\_ in favour of \_\_\_\_\_  
\_\_\_\_\_ OR

\*Credited to SB / CD A/c No. No. \_\_\_\_\_ at \_\_\_\_\_ Branch of Abhyudaya co-op Bank  
Ltd. in full and final settlement of my / our claim of the balance in Account No (s). \_\_\_\_\_

Standing in the name of the Shri / Smt. / Kum \_\_\_\_\_

I / we am / are aware that I / we / am / are receiving the payment from the bank as a trustee  
being nominee / legal heir(s) of the deceased depositor. I / We do not have any other claim from the  
Bank and the Bank hereby stands fully discharged.

Place:

Date:



(Signature of Nominee/Claimant(s)  
over a Revenue Stamp)

### DECLARATION (in case funds are settled in favour of a 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 settlement of the balance in Account No.(s) \_\_\_\_\_ of \_\_\_\_\_  
will be utilized for the benefit of the minor only.

Signature

**RECEIPT**

Received with thanks from Abhyudaya Co-op. Bank Ltd., \_\_\_\_\_ Branch, a sum of  
Rs. \_\_\_\_\_ /- (Rupees \_\_\_\_\_ Only) by  
Banker's Cheque No. \_\_\_\_\_ dated \_\_\_\_\_ in favour of  
\_\_\_\_\_

OR

Credited to SB /CD A/c No. \_\_\_\_\_ at \_\_\_\_\_ Branch.  
in full and final settlement of my /our claim of the balance in Account  
No(s). \_\_\_\_\_ standing in the name of the Shri / Smt.  
/Kum \_\_\_\_\_.

I / we am / are aware that I / we am / are receiving the payment from the bank as a trustee being nominee / legal heir(s) of the deceased depositor. I / We do not have any other claim from the Bank and the Bank hereby stands fully discharged.

Place :

Date



(Signature of Nominee /Claimant(s)  
over a revenue stamp)

**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  
\_\_\_\_\_ favouring \_\_\_\_\_ issued by you in settlement of the balance in account  
No. \_\_\_\_\_ of \_\_\_\_\_ will be utilized for the benefit of the minor only.

Signature