

Application for Deceased claim
(To be used when account has nomination or is a joint account with survivor clause)

From

To

The Branch Manager,
Northern Railway Cooperative Bank Ltd
_____ 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 is in the name(s) of: _____
_____.

A. In case of Nomination

I,.....son/daughter of Shri.....

.....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/we 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) _____

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.

Place:
Date:

Yours faithfully,

(Claimant(s))

Application for Deceased claim

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

From

To

The Branch Manager

Northern Railway Cooperative Bank Ltd

_____ 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 Co-parceners with their respective ages.

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

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

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)

(i) Name of Claimant

Address

Signature

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

Northern Railway Cooperative Bank Ltd

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

Insert here the Name(s) 1) _____

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 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)