

Documents Required for Settlement of Claims in respect of Deceased Constituents

Balance Upto and inclusive of Rs.50000/-

Claim format signed by claimants + one independent witness

Stamped letter of Indemnity (LOI) for the amount

Application for Deceased Claim

(To be used when account has nomination or is a 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 is in the name(s) of: _____
_____.

A. In case of Nomination

I Son/daughter of Shri
..... residing at
..... am.

- (i) (i) the registered nominee in the above account(s).
- (ii) (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) _____

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,
..... 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 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) a) Whether Natural Guardian : _____

b) 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) c) In whose custody the Minor/Minors is/are? : _____

5. Claimant/s name/s and address in full : _____

(i) (i) _____

(ii) (ii) _____

(iii) (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 to on 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:

Date:

Yours faithfully,

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
.....Bank

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

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

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 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)

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 the legal heirs 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 number-----of Late-----will be utilized for the benefit of the minor only.

Balances above Rs. 50000/-

Claim format signed by all the Claimants
(other than those who have furnished the stamped letter of disclaimer)

Stamped letter of indemnity from claimant(s) + one surety good for the amount or two sureties jointly good for the amount

Affidavit (stamped from one independent respectable person well known to the deceased family but unconnected with it and acceptable to the bank.

Letter of disclaimer

Claim Format
(Revised)

To,
The Branch Manager,
State Bank of Patiala,

Address for correspondence
Shri/Smt./Kum.....

.....
.....Branch

Address
Date:

Dear Sir,

**Claim for Payment of Balances in the account (s) of
Late Shri/Smt./Kum (Expired on _____)**

I/We advise that Shri/Smt./Kum. Expired on/* is not traceable since*.

2. Late Shri / Smt./ Kum..... was maintaining a Savings Bank / Current Account / RD Account / TDR / STDR etc..... accounts in your Branch as follows: -

No.	Nature of Deposit	Account No.	Amount \$ Rs. Ps	Date of Maturity	Nature of Liability to the Bank, if any	Amount Rs. Ps
1)					1)	
2)					2)	
3)					3)	
4)					4)	
5)					5)	
	Total Amt.	(1 to 5)			Total Amt. (1 to 5)	

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

3. I/We lodge my/our claim for the above balances with accrued interest of the above named deceased in terms of : -

- a) * Will of the late Shri /Smt./Kum..... dated and a probate granted by the court of at dated (Copies enclosed).
- b) * Succession Certificate dated granted by the Court of at (Copy Enclosed).
- c) * Letter of Administration No.-dated issued byat(Copy enclosed).
- d) * The deceased died intestate. We lodge our claim without a legal representation for payment as per the Bank's rules & discretion.

(* Strike out if not applicable.)

4. 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., Date, Authority – copy enclosed. Original to be produced for verification).
- (c) Permanent Address of the deceased.....
- (d) Religion
- (e) Which Law of Succession is applicable
- (viz Hindu, Mohamedan etc..)
- (f) Names in full of the parents of the deceased:
I) Father
- II) Mother
- (g) If parent (s) are living, their ages: 1) Father Years, II) Mother Years.
- (h) Name in full of the widow / widower of the deceased Smt./Shri
Age, (if living) Years.
- (i) Name (s) & age (s) of the living children of the deceased:
I) Age Years
II) Age Years
III) Age Years
IV) Age Years

(j) Name (s) & age (s) of the living Grand Children of the deceased:

(Children of only predeceased son or daughter)

I) ----- Age ----- Years
II) ----- Age ----- Years

(k) Name (s) & age (s) of living brothers of the deceased:

I) ----- Age ----- Years
II) ----- Age ----- Years

(l) Name (s) & age (s) of the living sisters of the deceased:

I) ----- Age ----- Years
II) ----- Age ----- Years

(m) Name (s) of the Minor (s) & Natural Guardian (s) / Legal Guardian (s) of minors amongst the claimants, (If Legal Guardians is appointed, a copy of the order must be enclosed.)

(1) Name (s) of the Minor Claimant (s)

I) -----
II) -----

(2) Name (s) of the Guardian (s) & Relationship with the Minor Claimant (s) above.

(I) -----

----- (n) Shri/Smt./Kum. ----- i.e. the person
furnishing the declaration below / the affidavit (Annexure 'B') knows our family for last -----
years & is unconnected with our family.

Name (s) in full, address of the heir (s)

I) -----
II) -----
III) -----
IV) -----
V) -----
VI) -----
VII) -----
VIII) -----
IX) -----
X) -----

I know the deceased and his family since last ----- years. I am not related in any manner whatsoever to the deceased or any of the above mentioned persons 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 & Date -----

Signature with date

(To be signed by an independent respectable person well known to the deceased person's family but unconnected with it and acceptable to the Bank.)*

*(Where the amount of the claim for balances exceeds Rs.one lakh, the person furnishing the declaration will have to execute an affidavit as per the format enclosed (Annexure - B) before a "Judge / Magistrate /Notary" instead of the declaration. The affidavit will be stamped according to the Stamp Act in force in the respective State.)

(o) * Names and ages of the claimants who propose to execute the Letter of Disclaimer: -

NAME AGE (Years)

I) -----

- II) -----
- III) -----
- IV) -----
- V) -----
- VI) -----
- VII) -----
- VIII) -----

(p) * A Letter of Disclaimer as per Annexure – A duly stamped & executed is enclosed
 * **(Strike out if not applicable)**

(q) We propose the following surety (ies):
(No surety required for amounts up-to Rs.10000/-)

- I) Name & Address: Shri/Smt./Kum. -----
-
- II) Name & Address: Shri/Smt./Kum. -----
-

(The detailed information on the sureties, to arrive at their worth, is to be furnished in a separate form Annexure – I. 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 as per format enclosed (Annexure – C). The Letter of Indemnity will be stamped according to the Stamp Act in force in the respective State.)

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

Signature (s) of the claimant (s) who will receive the amount

- I) -----
- II) -----
- III) -----
- IV) -----
- V) -----
- VI) -----

Place -----

----- Date -----

(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.)
 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 identifying 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.

LETTER OF DISCLAIMER

The Branch Manager / Chief Manager / Asstt. General Manager
State Bank of Patiala,

Dear Sir, _____ * Account No. _____

in the name of
Shri/Smt./Kum. _____

Balance Rs. _____

With reference to the above account(s). 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. _____
- 1. _____
- 2. _____
- 3. _____

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, in any proceedings.
I/We also undertake to bind ourselves, our heirs and legal representatives not to revoke the
declaration made herein.

<u>Sr No.</u>	<u>Name of the Claimants</u>	<u>Age</u>	<u>Signature</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____

Signed before me This _____ day of _____

SEAL

*fill in here the type of account viz (Notary Public / Magistrate)
SB/RD/Term deposit, Current A/c

AFFIDAVIT

I/We (1) _____ son of _____ and(2) _____ son of _____ residing at (1) _____ and (2) _____ do hereby make oath*/solemnly affirm and say as follows: -

that Shri Smt./Kum. _____ (Name of the deceased) (here-in-after 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: -

Name	Age	Relationship with the deceased
(i) _____		
(ii) _____		
(iii) _____		
(iv) _____		
(v) _____		
(vi) _____		
(vii) _____		
(viii) _____		
(ix) _____		
(x) _____		

(State the name, Age and Relation-ship of each of the Persons with the-Deceased)

4 That we are 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.

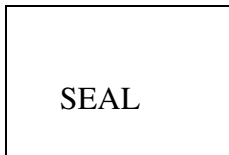
5. That we are informed and we verily believe that the deceased has left certain deposits*/assets with the State Bank of Patiala _____ Branch, to which the above mentioned persons are entitled to claim.

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 State Bank of Patiala _____ Branch, has agreed at our request to make payment of the amounts of the deposits*/to deliver the assets to the abovementioned 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 1 _____

At this _____ Day of _____ in the 2. _____

Presence of _____ Before me



Judge / Magistrate / Notary

(Delete whichever is inapplicable)

LETTER OF INDEMNITY

(Letter of Indemnity with respect to payment of Balance in the Deceased Constituents' Account without production of Legal Representations)

To

The Branch Manager/Chief Manager/Asstt. General Manager State Bank of Patiala,

IN CONSIDERATION of your paying or agreeing to pay us

- 1. _____
2. _____
Insert here the name (s) of the claimants 3. _____
4. _____
5. _____
6. _____

The sum of Rupees _____ standing at the credit of Savings Bank/Current/R.D. Account No. _____ 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 Duty to the effect that estate duty has been paid or will be paid or none is due I/We

Insert here the name (s) of the surety (ies)

- 1) _____
2) _____

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 inconsequence 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. _____ 6. _____

(heirs/claimants of the deceased)

SIGNED AND DELIVERED by The above named

- 1. _____
2. _____
(Sureties)