# Settlement of Claims in Various types of accounts/Facilities

# 1. With Nomination

Sr. No.	Nature of Account	Single Depositor	Joint A/c (Operated jointly)	Joint A/c (Either or Survivor)	Joint A/c (Former/ Latter or Survivor)	Joint A/c (Any one or Survivors)
A.	Saving/Current A/c	Nominee	1. On death of one depositor  — legal heirs of deceased+ Survivors  II. On death of all depositors — Nominee	1. On death of one depositor – Survivor  II. On death of both depositors – Nominee	1. On death of Former/ Latter- Survivor  II.On death of both depositors -Nominee	1. On death of one or more depositor/s – Survivor/s  II. On death of all depositors – Nominee
В.	Term Deposit Account	-do- (on maturity of deposit)	-do- (on maturity of deposit)	-do- (on maturity of deposit)	-do- (on maturity of deposit)	-do- (on maturity of deposit)
C.	Premature withdrawal of FD	-do- (As per terms of contract)	-do- (As per terms of contract)	-do- (As per terms of contract)	-do- (As per terms of contract)	-do- (As per terms of contract

### 2. Without Nomination

Sr. No.	Nature of Account	Single Depositor	Joint A/c (Operated jointly)	Joint A/c (Either or Survivor)	Joint A/c (Former/ Latter or Survivor)	Joint A/c (Any one or Survivors)
A.	Saving/Current A/c	Legal heirs or person mandated by them	1. On death of one depositor – legal heirs of deceased+ Survivors  II. On death of all depositors – legal heirs of all the depositors	II. On death of both depositors - legal heirs of all the	II. On death of both depositors - legal heirs of all the	1. On death of one or more depositor/s – legal heirs of deceased+ Survivors  II. On death of all depositors – legal heirs of all the depositors
			_	depositors	depositors	_
B.	Term Deposit Account	-do- (on maturity of deposit)	-do- (on maturity of deposit)	-do- (on maturity of deposit)	-do- (on maturity of deposit)	-do- (on maturity of deposit)
C.	Premature withdrawal of FD	-do- (As per terms of contract)	-do- (As per terms of contract)	-do- (As per terms of contract)	-do- (As per terms of contract)	-do- (As per terms of contract)

## 3. Illustrations on Joint Accounts

## A. Joint Deposit Accounts (Without Nomination)

<b>Deposit Account of</b>	With survivor clause	Without survivor clause
<u>A+B</u>		
A dies	B can operate	B + Legal heirs of A
Both A+B die	Legal heirs of A + Legal heirs of	Legal heirs of A + Legal heirs
	В	of B
<u>A+B+C</u>		
A dies	B + C can operate	B + C + Legal heirs of A
A + B die	C can operate	C + Legal heirs of A + Legal
		heirs of B
A + B + C die	Legal heirs of all	Legal heirs of all

## B. Joint Deposit Accounts (With Nomination)

<b>Deposit Account of</b>	With survivor clause	Without survivor clause
<u>A+B</u>		
A dies	B can operate	B + Legal heirs of A
Both A+B die	Nominee	Nominee
<u>A+B+C</u>		
A dies	B + C can operate	B + C + Legal heirs of A
A + B die	C can operate	C + Legal heirs of A + Legal
		heirs of B
A + B + C die	Nominee	Nominee

# **Settlement of Claims in respect of Deceased Depositors**

# **Check-list of Documents**

Claims	Document Obtained : Yes/No
1. Accounts with Nomination Clause :	103/10
(i) Application of Deceased Claim from	
Nominee/Guardian of nominee	
(Annexure-3)	
(ii) Copy of Death Certificate (verified with	
original)	
(iii) Identify proof (Ration Card, Election ID	
Card, PAN Card or Passport or any other	
satisfactory proof)	
2. Joint Accounts with Either of Survivor Cla	use:
(i) Application of Deceased Claim from	
Survivor(s) (Annexure-3)	
(ii) Copy of Death Certificate (verified with	
original)	
3. For cases other than Nomination/Joint Acco	ounts with survivor clause:
(For amounts up to threshold limit)	
(i) Application for Deceased Claim	
(Annexure –4)	
(ii) Copy of Death Certificate	
(iii) Letter of Indemnity signed by claimant(s)	
(Annexure-5)	
4. RECEIPT (Annexure-6)	

### **Annexure-III**

<b>Application for Deceas</b>	ed Claim	
(To be used when acco	unt has nomina	tion or is a joint account with survivor clause)
From		
	-	
	-	
To	-	
The Branch Manager,		
Bank		
	Dranch	
D Ci-	_ DI dI ICII	
Dear Sir,	_	
	Re:	Deceased Account
		Late Shri/Smt
		Account No.(s)
I/We advise the demise	e of Shri/Smt	on
	He/She h	nolds the above account(s) at your branch. The account is in the
name(s) of:		
A. In case of Nominati	on	
71. III case of Nominati	OII	
I	Son	/daughter of Shri
	_	
	-	inee in the above account(s).
	•	zed to receive payment on behalf of Master/Miss
who is t	he nominee in t	the above account(s) and is a minor as on the date of this claim.
Please settle the balance	ce in the accour	nt in the name of the nominee. I/we receive the payment as
trustee(s) of the legal h	eirs of the dece	eased.
B. In the case of joint a	ccount	
I/We Request you to de	elete the name	of deceased person and continue the account in my/our name(s)
with same mode of ope		
The same mode of op-	3. 4. 6. 6. 16.	
I/We submit photocopy	v of the following	ng document(s) together with originals. Please return the original
to us after verification.	y or the followin	ig document(3) together with onginals. Hease return the original
	ما ام، ،	
Death Certificate issued	7 DA	
identity proof (required	in nomination	cases)
Place:		Yours faithfully,
Date:		
		(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			
Dear Sir,		Dav	Deceased Account
		Re:	
			/Smt
		Account	: No.(s)
I/We advise the demis	e of Shri/Smt		on
	He/She holds the above account(s) at you	ir branch. The	e account(s) is/are in
the name of			
			·
I/We lodge my/our cla	im for the balances with accrued interest lying to	the credit o	f the above named
deceased who died int	estate. I/We am/are the legal heirs of the above	named dece	ased and lodge
my/our claim for paym	nent as per the bank's rules and discretion. The re	elevant inforr	mation about the
deceased and the lega	l heirs are as under.		
1. Names in full of the	parents of the deceased:		
Father:			_
Mother:			_
2. Religion of the dece	ased:		

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	Age
			Deceased	
(i)			<del></del>	
(ii)				
(iii)				
(iv)				
(v)				
(vi)				

		` ,
<ul> <li>4. Name or Names of the Guardian/s of the minor Children of the Depositor</li> <li>a) a) Whether Natural Guardian</li> <li>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</li> <li>c) In whose custody the Minor/Minors is/are?</li> </ul>		
5. Claimant/s name/s and address in full	:	
(ii) (ii)		
•	nal + 1 photocopy) issued by	inal death certificate to us after verification:
We request you to pay the on my		he credit of the above named deceased to
I/We hereby solemnly affirm knowledge and belief.	that the above statements	are true and correct to the best of my/our
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 <u>LEGAL REPRESENTATION</u>

То		
The Branch Manager		
IN CONSIDERATION o	your paying or agreeing to pay me/us,	
Insert here the 1) Name (s) Claimants	2)	
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	
estate or a Certificate be paid or none is of executors and admini- your successors and expenses which may	out production of Letters of Administration or a Succession Certificate to from the Controller of Estate Duly to the effect that estate duly has been paid the I/we do hereby for myself/ourselves and my/our heirs, legal represent strators, jointly and severally UNDERTAKE AND AGREE to indemnify y assign against all claims, demands, proceedings, losses, damages, charg the raised against or incurred by you by reasons or in consequence of your ag me/us the said sum as aforesaid.	or will ntatives you and ges and
SIGNED AND DELIVER	ED	
By the above named	on thisDay of two thousand	
SIGNED AND DELIVER The above named	•	
4 5	36	
(heirs/claimants of th	e deceased)	

#### RECEIPT

Received		thanks upees_	from	XXX	Bank_				anch,			um nker's		Rs.
No			_dated_			in			fav	our				of
my/our No(s)	claim	as	successo		n the	balance the	in name		tull a		the		men coun lecea	nt(s)
Shri/Smt/l	Kum			•		I/We do	not have	any	other	r cla	im			
from the	Bank her	nceforth.	3											
Place:	J													
						(Signat	over a r		_					
DECLAR	ATION i	in case fi	ınds are s	ettled in	n favour o	of a Minor								
Banker's	Cheque	No	dated	1	favou	 ring wil	issued	by	you	in	settl	ement	of	the