

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

From

To

The Branch Manager,
IndusInd Bank Ltd.
_____ Branch

Dear Sir,

Re: **Deceased Account**

Late Shri/Smt.....

Account No(s) SB _____

CA _____

TDR _____

Others _____

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) or.
- (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 request you to close the account and enclose the Account Closure Request Form.

I/we receive the payment as trustee(s) of the legal heirs of the deceased.

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
IndusInd Bank Ltd.

_____ Branch

Dear Sir,

Re: **Deceased Account**

Late Shri/Smt.....

Account No(s) SB _____

CA _____

TDR _____

Others _____

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(s) 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 Deceased | Relationship with Deceased | Age |
|-------|--------------------------|----------------------------|-----------------------------------|------------|
| (i) | _____ | _____ | _____ | _____ |
| (ii) | _____ | _____ | _____ | _____ |
| (iii) | _____ | _____ | _____ | _____ |
| (iv) | _____ | _____ | _____ | _____ |
| (v) | _____ | _____ | _____ | _____ |
| (vi) | _____ | _____ | _____ | _____ |

(Continued)

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 complete address) :

- (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(s) of Claimant(s)

- | | Address | Signature |
|--------------------------|---------|-----------|
| (i) Name of Claimant | | |
| (ii) Name of Claimant | | |
| (iii) Name of Legal Heir | | |
| (iv) Name of Legal Heir | | |

Affidavit cum Indemnity Letter

In respect of payment of balance in deposit accounts / contents of deposit locker/safe custody articles of deceased person;

(to be stamped with the duty payable for affidavit & Indemnity bond)

I/We Mr/Ms/Miss
(name/names of the claimants),(s/o, w/o, d/o),
..... aged, address
.....

do hereby solemnly affirm and state as follows.

1. I/We am/are the legal heirs of Mr/Ms/Miss (name of the deceased account holder) and the deceased is my/our (father/mother/wife/husband/son/daughter etc.)
.....

2. I/We state that I/We the following legal heirs are the only legal heirs entitled to claim the balance deposit/amount/jewels/ornaments and other valuables the contents held in the locker/safe custody

| No | Name | Age | Relationship to the deceased |
|-----------|------|-----|------------------------------|
| <u>1.</u> | | | |
| <u>2.</u> | | | |
| <u>3.</u> | | | |
| <u>4</u> | | | |
| <u>5</u> | | | |

3. I/We further state that the deceased was holding an account (hereinafter referred to as “the account”) (specify the account details) _____ in _____ branch of _____ bank (herein after referred to as “the Bank”). At the time of the death of the deceased the account was having a credit of Rs(balance amount in the account) which includes interest upto _____(date of payment) amount to Rs(amount being now paid).

4. I/We affirm that I/We am/are the sole legal heirs of the deceased who are entitled to receive the amount standing in the credit of the account belonging to the deceased.

5. I/We have requested the bank to make the payment of the amount standing in the credit of the account belonging to the deceased together with interest thereon as applicable to Shri/Smt being one of the legal heirs for and on behalf of all the legal heirs.

OR

I/We have requested the bank to hand-over contents of the safe deposit locker/items held in safe custody to Shri/Smt. _____ being one of the legal heirs for and on of all the legal heirs.

6. I/We are aware that the Bank has agreed to settle our claims relying on this affidavit and I/We agree to indemnify the bank in respect of such payment or delivery of the contents of items in safe deposit locker or held in safe custody against any claim made by any person for the amount standing to the credit of the account of the deceased.

7. I/We for ourselves and my/our respective heirs, executors and administrators jointly and severally agree, affirm and undertake that the bank, its successors and assigns and its

managers, agents, officers and servants and their respective estates and effects are and shall from time to time and at all times hereafter be kept safe and saved harmless and indemnified for and in respect of such payment and against all actions, losses, cost, charges, expenses and demands whatsoever in respect of the said payment or delivery of the contents of items in safe deposit locker or held in safe custody.

All the averments made herein before are true and correct and I/We put my/our signature/mark on this Day of20 at in the presence of

Signature(s) of deponents. (claimants)

Signature of Witness

Name and Address of Witness

In consideration of the premises, we the undersigned _____
(Name (s) of Surety(ies) _____ jointly and severally guarantee to you, IndusInd Bank Ltd., the payment of all moneys (applicable in case of Re. 1.00 lac and above) due under the aforesaid indemnity by the executants thereof.

Signature: _____

Signature: _____

Name: _____

Name: _____

Occupation: _____

Occupation: _____

Address: _____

Address: _____

Date: _____

Affidavit to be attested by Notary Public

RECEIPT

Received with thanks from IndusInd 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 nominee / legal heir / survivor / 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 nominee / survivor / successor / all the legal heirs

Over a revenue stamp)

DECLARATION in case funds are settled in favour of a Minor

I,----- 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.