

Application for Deceased Claim

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

From

.....  
.....

To

The Manager,  
Shikshak Sahakari Bank Ltd.

Branch

Ref : Deceased account of Late Shri/Smt .....  
Account No(s).....

Dear Sir,

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

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

**B. In 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.

1. Death certificate issued by .....
2. Identity proof of claimant.  
If nominee is a minor.
3. Identity proof of minor (required in nomination cases).....
4. Identity proof of claimant/for and an behalf of minor.

Place:  
Date:

Yours faithfully,

(Claimants)

**Application for Deceased Claim**

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

From  
.....  
.....

To  
The Manager,  
Shikshak Sahakari Bank Ltd.,  
..... Branch

Ref : Deceased account of Late Shri/Smt .....  
Account No(s).....

Dear Sir,

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 :.....  
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	Relationship with deceased	Age
(i) .....	.....	.....	.....
(ii) .....	.....	.....	.....
(iii) .....	.....	.....	.....

4. Name or Names of the Guardian/s of the minor Children of the depositor : .....
- (a) Whether Natural Guardian : .....
- (b) Whether guardian appointed By 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 : .....

6. Relation of claimant with deceased.

7. Name & particulars of all legal heirs/ successor of deceased.

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. Indemnity Bond.
3. Legal Heirship Certificate
4. No Objection Certificate.
5. Affidavit.
6. Ration card in the name of deceased.
7. ....

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.

Yours faithfully,

Place:

Date:

Signature of Claimant(s)