

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

From

To

The Branch Head
Axis Bank Ltd.

_____ Branch

Dear Sir,

Re: Deceased Account

Late Shri/Smt _____

Account No(s) _____

Term/Fixed Deposit No(s) _____

I/We advise the demise of Shri/Smt. _____ on _____. He/she holds the above account(s)/term/fixed deposit(s) at your branch. The account(s)/term/fixed deposit(s) is/are in the name(s) of _____

_____ with MOP as _____.

I/We submit photocopy of the following document(s) together with originals. Please return the original to us after verification.

- i. Death Certificate issued by _____
- ii. Identity proof (required in nomination cases) _____

A. In case of Nomination

I, _____ son/daughter of Shri _____
Residing at _____.

- i. The registered nominee in the above account(s)/ term/fixed deposit(s).
- ii. The person authorized to receive payment on behalf of Master / Miss _____ who is the nominee in the above account(s) / term/fixed deposit(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 from the Bank as trustee(s) of the legal heirs of the deceased depositor i.e. such payment to me/us shall not affect the right of claim which any person may have on me for deposits of the deceased and there is no court order seeking to restrain the Bank from making such payment. I further affirm that payment of the balances of such account(s) to the nominee represents a valid discharge of the bank's liability.

(For premature closure by Nominee of Term/Fixed Deposit/s)

Please prematurely close the above term/fixed deposit(s) as on the date of this instruction and settle the proceeds in the name of the nominee. I/we instruct for premature closure and will receive the payment from the Bank as trustee(s) of the legal heirs of the deceased depositor i.e. such payment to me/us shall not affect the right of claim which any person may have on me for deposits of the deceased and there is no court order seeking to restrain the Bank from such premature closure or making such payment. I further affirm that such premature closure and payment of the proceeds of such deposit to the nominee represents a valid discharge of the bank's liability.

B. In the case of joint account

- Please settle the balance in the account in the name of the survivor. I/we receive the payment from the Bank as trustee(s) of the legal heirs of the deceased depositor i.e. such payment to me/us shall not affect the right of claim which any person may have on deposits of the deceased and there is no court order seeking to restrain the Bank from making such payment.

OR

- I/We request you to delete the name of deceased person and continue the account in my /our name(s) with mode of operations as _____.

(For premature closure by Survivor of Term/Fixed Deposit/s)

Please prematurely close the above term/fixed deposit(s) as on the date of this instruction and settle the proceeds in the name of the survivor(s). I/we instruct for premature closure and will receive the payment from the Bank as trustee(s) of the legal heirs of the deceased depositor i.e. such payment to me/us shall not affect the right of claim which any person may have on me for deposits of the deceased and there is no court order seeking to restrain the Bank from such premature closure or making such payment. I further affirm that such premature closure and payment of the proceeds of such deposit to the survivor(s) represents a valid discharge of the bank's liability.

Place:

Yours faithfully,

Date:

(Claimant(s))

For Office Use

Name of Customer (Deceased): _____ **CIF:** _____

Date of Death: _____ Date of Intimation to Bank: _____

Name of Claimant(s): _____

[Nominee/survivor(s)/claimant(s). If Joint holders, please list name of all the holders]

*(Please check details of related party and nomination in Finacle)

Name of Legal Heirs (if applicable): _____

(Applicable for all types of accounts in cases where there is no nomination/ no survivors/no probated will/no succession certificate/ no court order/no letter of administration.)

Mode of Settlement:

In favour Nominee / Survivor(s) / Claimant(s)]:

DD to be issued in favour of:

OR

Continue with deletion of Deceased Name (Yes/No): _____ MOP: _____

(In case settlement happens in favour any person other than nominee/survivor(s)/Legal Heirs, Branch is required to attach approval of Competent Authority as per Delegation of Power.)

Certification by Branch Head:

Certified that due diligence and discrete enquiry have been made to identify the claimant(s). In case of identification of legal heirs, filed verification has also been done.

All the documents have been verified with the original (wherever applicable).

Also, it is certified that the sureties provided for claim settlement are good to the value severally equivalent to the claim amount.

Signature:

Signature:

(Prepared by Branch Operation Head)

(Approved by Branch Head)

Grade: _____ Employee code: _____

Grade: _____ Employee code: _____

Date: _____