

ANNEXURE-1

Application for Deceased claim

(To be used for cases other than Nomination / joint account with survivorclause)

From

To

The Branch Manager
The South Indian Bank Ltd.,
_____ 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 Coparceners with their respective ages.

Contd...2

ANNEXURE-11

APPLICATION FOR DECEASED CLAIM

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

From

To

The Branch Manager,
The South Indian Bank Ltd.
_____ Branch

Dear Sir,
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

(ii) the registered nominee in the above account(s).

(iii) 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 receive the
payment as trustee 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:

Yours faithfully,

Date:

(Claimant(s))

ANNEXURE-111

RECEIPT

(TO BE OBTAINED FROM THE NOMINEE)

I, Sri/Smt. _____, S/o. / D/o. _____ aged _____ years, the nominee/guardian of the minor nominee _____ hereby acknowledge receipt of a sum of Rs. _____ (Rupees _____ only) from The South Indian Bank Ltd., _____ Branch, being the amount payable in the accounts mentioned hereunder of the late _____ as his/her nominee in full and final settlement of the claims * by substitution of my name to the deposit account.

Deposit A/c.No. / Assets.

Amount / Value in Rs.

I hereby confirm that I have no further claim against the Bank in respect of accounts/assets of the said deceased as nominee and the Bank is fully discharged from all liability and obligation to me or to any person claiming for or through me including the legal heirs of the deceased depositor(s).

Date:

Revenue Stamp

WITNESSES: (If nominee affixes
Thump impression)

(Signature with name and
address of the nominee /
Guardian of the minor nominee)

1.

2.

* Strike out if not applicable.