

**Death Claim Application form No. – 1**

(Applicable for application without nomination or for Joint Account with Survivorship clause)

From-----  
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To Branch Manager  
 The Ratnakar Bank Limited  
 ----- Branch

Dear Sir,

Ref: Deceased account of late Shri/Smt. ----- A/c No. -----

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 in testate. 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) Grandchildren. 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
1				
2				
3				

4				
5				
6				

4. Name or names of the Guardian/s  
Of the minor, Children of the depositors \_\_\_\_\_

(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

(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 to  
..... On my/our behalf. I/ we receive the payments as  
trustee (s) of the legal heirs of the deceased.

**Instructions for Treatment of flows in the name of the deceased depositor**

**Option 1 –**

I /We authorize bank to open an account styled as 'Estate of Shri \_\_\_\_\_, the Deceased' where all the pipeline flows in the name of the deceased account holder could be allowed to be credited and no withdrawals be made therefrom.

**OR**

**Option 2**

I / We authorize bank nominee to return the pipeline flows to the remitter with the remark "Account holder deceased" and intimate the survivor(s) / nominee accordingly.

I/We hereby solemnly affirm that the above statements are true and correct to the best of my /our knowledge and belief. I/we receive the payment as trustee(s) of the nominee/joint holder of the Missing person.

Place :

Yours faithfully,

Date :

Signature of Claimant (s)

**Name of Claimant**

**Address**

**Signature**