

## 1. Claim Application from Nominee

To

The Branch Manager

HDFC Bank Limited

1.	Name in full	
2.	Occupation	
3.	Address - Office	
.	.	
.	- Residence	
.	.	
4.	Date of birth & Age of Nominee	
5.	Name of the nominees father/husband	
6.	Name of the deceased customer	
7.	Address of the customer	
8.	Age of the customer	
9.	Relationship, if any, of the Nominee with deceased constituent	
10.	Whether the nominee is in possession of cheque book/ATM card/Deposit Advice/Locker key/ Acknowledgement of nomination	
11.	If not, the reasons why the nominee is not in possession of the same	
12.	How did the nominee come to know of the nomination	
13.	Name of the bank and branch with	

	whom the nominee is having an account	
14.	Particulars of deposits and lockers on which the Nominee claimant is registered	

I request the Branch Manager, HDFC Bank Limited, \_\_\_\_\_ branch, to pay the proceeds of the deposits/deliver the contents of the locker mentioned above to me as nominee of \_\_\_\_\_ (deceased constituent).

I hereby declare that the above information furnished is all true, correct and full and that I have not omitted or suppressed any information called for under any of the above columns.

Date:

Place:

\_\_\_\_\_  
Signature of the Claimant (Nominee)

-----

For Official Use of the Bank

Views/Recommendations of the Personal Banker:  
(Furnish details of the deposits and enclose duly signed inventory of locker contents)

\_\_\_\_\_  
Date : Signature of the Personal Banker

Branch Manager Comments and Sanction:  
After proper scrutiny of the claim application, personal interview with the claimant(Nominee) and verification of the death certificate and declaration, I sanction the above claim as recommended by the Personal Banker.

\_\_\_\_\_  
Date: Signature of the Branch Manager

## 2. Declaration from the Appointee of a Minor Nominee

To

The Branch Manager

HDFC Bank Limited

\_\_\_\_\_Branch

I, Shri/Smt./Kum \_\_\_\_\_ Nominee/appointed on behalf of the minor nominee hereby declare that I am the Nominee /appointed on behalf of the minor nominee of the deceased Shri/Smt. \_\_\_\_\_. I further declare that I am nominated to claim the deposit monies/articles held in Safe Custody/Safety Locker with \_\_\_\_\_ branch by Shri/Smt. deceased.

The deposit monies/articles held in Safe Custody/Safety Locker are held in account No(s). \_\_\_\_\_ Locker No. (s) \_\_\_\_\_ / Safe Custody Receipt No. \_\_\_\_\_ of Shri/Smt. \_\_\_\_\_deceased.

Shri/Smt. \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_

(Nominee/appointed on behalf of minor nominee) Date \_\_\_\_\_

Witness:\*

1. Magistrate or Judicial Official

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

2. An officer of Central or State Govt.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

3. An officer of a Bank

Name \_\_\_\_\_

Name of the Bank / Branch \_\_\_\_\_

Signature \_\_\_\_\_

or

4. Two persons acceptable to the bank

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

(\*Strike out whichever is not applicable)

### 3. Claim Application from Legal Heirs

The Branch Manager,  
HDFC Bank  
\_\_\_\_\_ Branch

Dear Sir,

Re: Claim for Balances and Other Assets

I/We, the undersigned, hereby declare that I/We am/are the rightful legal heir(s) of the deceased \_\_\_\_\_, entitled to -

- a) receive the amount due on the deposit(s) detailed below,
- b) receive the contents of safe deposit locker(s)/articles in safe custody,
- c) shares/securities held in safe custody.

Accordingly, I/We hereby submit my/our claim and furnish the requisite particulars/ documents/indemnities, etc. as prescribed by the bank.

1.	Full name of the deceased account holder	.
2.	Details of Deposit Account(s)	Account Number, Balance
.	.	.
.	.	.
.	.	.
.	.	.
.	.	.
3.	Details of Safe Deposit Locker(s)	.
4.	Details of Articles in Safe Custody	.
5.	Details of Shares & Securities in Safe Custody	.

6.	Details of Overdrafts, if any	.
7.	Particulars of all the legal heir(s) (other details for each legal heir are given in enclosed Form 'D')	Name, Age, Relation to the Deceased
.	.	.
.	.	.
.	.	.
.	.	.
.	.	.
.	.	.
8.	Are there any other claimant(s)/heir(s) other than those mentioned above and joining in the Indemnity Bond who are also entitled to the share in the property left by the deceased as per the Personal Laws applicable to the deceased ?	.
9.	Has the deceased left a Will? Who are the executors named in such will and whether probate is obtained? If not, why Probate has not been obtained?	.
10.	If the deceased has not left a Will, has any legal representation been obtained to his estate, such as Succession Certificate, Letters of Administration, Administrator General Certificate? If so, by whom?	.
11.	If the deceased was married, did he/ she leave a widow/widower and/or a child or children of a predeceased child? Any minors? If so, is there a legal or natural guardian?	.
12.	'If the deceased did not leave a Widow/Widower	.

	and a child or children or issue, did he/she leave him/her surviving any parent, "brother, sister or children of a predeceased brother, or sister ?	
13.	Is the property left by the deceased a part of the Joint Hindu Undivided Family property? If yes, who was and is the Karta of HUF ?	
14.	Are there any unsatisfied creditors? If so, state the names with amount claimed. If not, state accordingly.	
15.	What is the position regarding liability to and payment of Estate Duty, Income-tax, Sales tax and other Government dues?	
16.	Has the deceased-left any other assets? If so, who is/are the claimants having acquired title to such assets?	
17.	Was the deceased doing any business or was he in service? If the service, was he entitled to any provident Fund? If he was whom did he nominate to receive such Provident Fund? Have Provident Fund dues been paid? If so, to whom?	
18.	Was the life of the deceased insured? If so, to whom have the moneys been paid? Was there a nomination or assignment in respect of the assurance moneys? If so, to whom?	
19.	Proof of claimant(s)' right to claim the amount lying to the credit of the deceased and other assets with the bank, in the absence of the representations to the estate of the deceased	
20.	Name of sureties offered (Particulars of sureties and Declarations from	1. 2.

	them are furnished in the enclosed formats 'B' & 'C')	
21.	Whether the claimant(s) has/have any liability (for advance raised from the Bank) or indirect liability (as guarantor for advance raised by others), If so, please state the amount and name of the borrowers. If not, state accordingly.	
22.	Whether the claimant(s) is/are in possession of Cheque Book(s)/ ATM Card/Deposit Advice/Locker Key/Safe Custody Receipt, etc. Furnish details and enclose these	
23.	If not, the reasons why the claimant(s) is/are not in possession of these items	---
24.	How did the claimant(s) come to know the details of above referred accounts and other banking relationships of the deceased	---
25	Any other facts which the applicant(s) want(s) to state in support of his/her/ their claim	

I/We hereby declare that the above statements and answers are true. I/We enclose an Indemnity Agreement signed by me/all of us along with our sureties. I/We request that bank to -

£ pay the balances, and/or

£ deliver the contents of safe deposit locker, and/or

£ articles in safe custody, and/or

£ shares & securities in safe custody,

to -

1)

2)

who is/are hereby irrevocably authorised by me/us to receive the above stated sums/other assets and give a valid discharge/receipt (binding me/all of us) to the bank. I/We also enclose a separate

Letter of Disclaimer in Form 'A' prescribed by the bank.

I/We hereby authorise the bank to recover the outstanding, together with interest thereon, any overdraft/loan account standing in the name of the deceased. The bank may also recover the outstanding service charges, or any other dues payable by the deceased.

I/We request the bank to kindly sanction my/our claim made above.

Name of Claimant(s) Signature of Claimant(s)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

Thumb Impression of claimant (if illiterate)

Name of the Claimant(s) \_\_\_\_\_

Witness for Thumb Impression

Name \_\_\_\_\_

Address \_\_\_\_\_

Note:

In case the claimant is illiterate, he/she should affix his/her Thumb impression in the specimen for signature of the claimant, which should be witnessed by a person known to the Bank.

(Following declaration to be given by the claimant who is illiterate or who does not understand English)

"I declare that above questions were explained to me and the answers thereto have been recorded at my instance as per my instructions and the same have been read over to and understood by me and that I have affixed my signature/thumb impression hereinabove after satisfying myself that they been correctly recorded".

Witness \_\_\_\_\_

Signature of the Claimant(s)

**4. Form 'A' Letter of Disclaimer**

The Branch Manager,  
HDFC Bank  
\_\_\_\_\_ Branch

Dear Sir,

**Re: Refund/Delivery of Balance and Other Assets belonging to the Deceased**

Our \_\_\_\_\_ Shri/Smt. \_\_\_\_\_ who holds the following accounts/assets with you died on \_\_\_\_\_.

Account No./Locker No./ Safe Custody No., etc.	Balance
---	.
.	.

I/We, the undersigned, along with Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ has/have applied to you for refund/delivery of the amount(s) outstanding in the above account(s) and delivery of the contents of locker(s), articles in safe custody, shares & securities in safe custody.

I/We hereby authorise Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ to receive the claim money/assets detailed above on our and their own behalf. I/We declare that the claimant Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ is/are the legal representative entitled to receive the amount of deposit/other assets in the name of the deceased and that I/We have no objection, if the Bank in pursuance of the request by me/us, refunds/delivers the amount/assets to him/her/them.

Thanking you,

Yours faithfully,

Name	Age	Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____

Address \_\_\_\_\_  
\_\_\_\_\_

**5. Form 'B' Declaration by Guarantors**

The Branch Manager,  
HDFC Bank  
\_\_\_\_\_ Branch

Dear Sir,

**Re: Refund/Delivery of Balance and Other Assets belonging to the Deceased**

Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ has/have been authorised by the legal heir(s) of the deceased Shri/Smt. \_\_\_\_\_ to receive from your Bank the refund of the amount, contents of safe deposit lockers, articles in safe custody and/or shares & securities in safe custody held in the name of the deceased.

Shri/Smt. \_\_\_\_\_, to the best of my/our knowledge, is survived by the following heir(s) including the claimant(s) named above.

Name	Age	Relation	to	the	Deceased
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I/We express my/our willingness to stand as guarantor(s) for the above request of the claimant(s) Shri/Smt. \_\_\_\_\_ Shri/Smt. \_\_\_\_\_ and to execute necessary documents in favour of the Bank, should the Bank propose to accede to the said request(s).

Thanking you,  
Yours faithfully,

Signature \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

### 6. Form 'C' Information to be Furnished by the Proposed Guarantors

1.	Full Name	---
2.	Office Address	.
3.	Residence Address	.
4.	Monthly Salary/Income	Rs.
5.	How long employed in the present job or business or professional years	---
6.	Annual Income (please enclose salary certificate or assessment order)	.
7.	Provident Fund	Rs.
8.	Life Insurance	Rs.
9.	Liability to the Bank(s)	As Borrower Rs. As Surety Rs.
10.	Banking Relations	Type of Account: Account No. : Since : Branch : Present Balance : Rs. Average Balance : Rs.
11.	a) Relationship with Claimant	.
	b) Relationship with Deceased	.

Signature:

### 7. Form 'D' Information about Co-heirs of the Deceased

1.	Name of the Co-heir	
.	.	.
2.	Occupation	
.	.	.
3.	Office Address	
---	.	.
4.	Home Address	
.	.	.
5.	Income (per month)	Rs.
.	.	.
6.	Relation with Deceased	
.	.	.
7.	Banking Relations	Type of Account: Account No. : Since : Branch : Present Balance : Rs.

Date:

Signature:

## 8. Letter of Indemnity

HDFC Bank Ltd.

\_\_\_\_\_

\_\_\_\_\_

IN CONSIDERATION OF your paying or agreeing to pay the balances, delivering or agreeing to deliver contents of safe deposit locker, articles kept in safe custody, shares & securities in safe custody held at the credit of and/or in the name of \_\_\_\_\_, the deceased as mentioned hereunder:

Account No.	Nature of Deposit	Balance/Principal Amount
.	.	.
.	.	.
Safe Deposit Locker No./Sealed Box in Safe Custody Account No.	Details of the Inventory of the Locker/Articles in Safe Custody	
.	Description Weight Value	
.	.	
.	.	
Shares/ Securities Custody A/c. No.	Details of Shares & Securities	
.	Date of Issue, Name of the Company, Distinctive Nos./ Folio No., No. of Shares/ Securities, Face Value, Total Face Value, Total Market Value as on _____	
.	---	
.	.	

without production of Letters of Administration or a Succession Certificate to his/her estate or a certificate from the Controller of Estate Duty to the effect that estate duty has been paid or will be paid or none is due.

I/We of the Ist Part -

- 1)
- 2)
- 3)
- 4)
- 5)

being the claimant(s) of the deceased, and

I/We of the IInd Part -

- 1)
- 2)

being the guarantor(s) for the claimant(s) of the Ist Part, do hereby, for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally, UNDERTAKE AND AGREE to indemnify you and your successors and assigns against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred by you by reason or in consequence of your having agreed to pay/or paying the said sum as aforesaid, having delivered or agreed to deliver the above mentioned assets to the claimant(s) of Ist Part.

Signed, sealed and delivered by the above named on this \_\_\_\_\_ day of \_\_\_\_\_ Two thousand \_\_\_\_\_ at \_\_\_\_\_.

Signed and Delivered

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

(Heirs of the Deceased)

Signed and Delivered

by the above named

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_

(Guarantors)

**9. Claim Application from Legal Claimant [Holder of Succession Certificate, or Letters of Administration, or Probate of Will]**

The Branch Manager,  
HDFC Bank  
\_\_\_\_\_ Branch

Dear Sir,

**Re: Claim for Balances and Other Assets**

I hereby declare that I have received the legal representation from the appropriate authority entitling me to receive from your Bank the balance(s) in the account(s) and/or the contents of safe deposit locker(s) and/or articles in safe custody and/or shares & securities in safe custody held with the bank in the name of \_\_\_\_\_, the deceased.

Accordingly, I hereby submit my claim and furnish the requisite particulars/documents for your consideration and necessary action.

1.	Name in Full	.
2.	Occupation	.
3.	Address - Office	.
.	.	.
.	- Residence	.
.	.	.
4.	Date of Birth and Age	.
5.	Name of the Deceased	.
6.	Relationship, if any with the deceased	.
7.	Details of Deposit Account(s)	Account Number, Balance
.	.	.
.	.	.

8.	Details of Safe Deposit Locker(s)	.
9.	Details of Articles in Safe Custody	.
10.	Details of Shares & Securities in Safe Custody	.
11.	Details of Legal Representations obtained. Original along with a copy enclosed	Type of Legal Representation, Issued by
.	.	1.
.	.	2.
.	.	3.
12.	Whether the claimant is in possession of Cheque Book(s)/ATM Card/Deposit Advice/Locker Key/Safe Custody Receipt, etc. Furnish details and enclose these	.
13.	If not, the reasons why the claimant is not in possession of these items	.
14.	How did the claimant come to know the details of above referred accounts and other banking relationships of the deceased	.
15.	Name of the bank and branch with whom the claimant is having an account	.

I hereby request the bank to arrange to pay the balance outstanding in the above referred account(s) of the deceased together with interest, if any, accrued thereon. I also request the bank to hand-over to me the contents of the safe deposit locker and/or articles in safe custody and/or shares & securities in safe custody lying with the bank in the name of the deceased. I also authorise the bank to recover the outstanding together with interest thereon in any overdraft/loan account standing in the name of the deceased. The bank may also recover the outstanding service charges, or any other dues payable by the deceased.

I hereby declare that the above information furnished is all true, correct and full and that I have not omitted or suppressed any information from the bank.

\_\_\_\_\_  
Signature of the Claimant

Thumb Impression of claimant (if illiterate)

Name of the Claimant \_\_\_\_\_

Witness for Thumb Impression

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

## 10. Receipt

Rs. \_\_\_\_\_

Received from HDFC BANK LTD, \_\_\_\_\_ branch a sum of Rupees \_\_\_\_\_ only standing to the credit of the deceased depositor of the bank Mr. /Mrs. /Ms. \_\_\_\_\_ in deposit account(s) mentioned below together with interest thereon in full settlement of my claim as the nominee.

### DEPOSIT ACCOUNTS

Sr. No.	Type of Deposit	Account No.	Amount Received on the Deposit including Interest (Rs.)
.			
.			
.			
.			

Place:

Date:

\_\_\_\_\_

**Name of the Nominee**

\_\_\_\_\_

**Signature**

Witness:

1.	Signature _____	.	2.	Signature _____
.	Name _____	.	.	Name _____
.	Occupation _____	.	.	Occupation _____
.	Address _____	.	.	Address _____
.	_____	.	.	_____

### 11. Form of Inventory of Contents of Safe Deposit Locker Hired from Banking Company

The following inventory of contents of Safety Locker No. \_\_\_\_\_ located in the Safe Deposit Vault of HDFC BANK LTD. \_\_\_\_\_ branch at \_\_\_\_\_.

\* Hired by Mr. /Ms. \_\_\_\_\_ deceased in his/her own name.

\* Hired by Mr./Ms. 1. \_\_\_\_\_ Deceased

2. \_\_\_\_\_ Surviving Joint

3. \_\_\_\_\_ Hirers

was taken on this \_\_\_\_\_ day of \_\_\_\_\_.

Sr. No.	Description of Articles in Safety Locker	Other Identifying Particulars, if any
.	.	.
.	.	.
.	.	.

For the purpose of inventory, access to the locker was given to the Nominee/and the surviving hirers/approved claimant(s)

£ who produced the key to the locker.

£ by breaking open the locker under his/her/their instructions.

All the articles found inside the locker are listed in the above inventory.

The above inventory was taken in the presence of:

1. Mr. /Ms. \_\_\_\_\_

Name of the Nominee \_\_\_\_\_ Signature of Nominee/ Approved Claimant(s)

Address \_\_\_\_\_

\_\_\_\_\_

OR

Mr. /Ms. \_\_\_\_\_

Name of the Nominee \_\_\_\_\_ Signature of Nominee / Approved Claimant(s)

Address \_\_\_\_\_

\_\_\_\_\_



## 12. Form of Inventory of Articles Left in Safe Custody with Banking Company

The following inventory of articles left in safe custody with \_\_\_\_\_ Branch, by Mr./Ms. \_\_\_\_\_ (deceased) under an agreement/receipt dated \_\_\_\_\_ was taken on this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

Sr. No.	Description of Articles in Safe Custody	Other Identifying Particulars, if any
.		
.		
.		

The above inventory was taken in the presence of:

1. Mr./Ms. \_\_\_\_\_  
 Name of the Nominee  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Signature of Nominee/ Approved Claimant (s)

OR

Mr./Ms. \_\_\_\_\_  
 Appointed on behalf of minor Nominee  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Signature of Nominee/ Natural Guardian  
 Natural Approved Claimant(s)

Witness:

1.	Signature _____		2.	Signature _____
.	Name _____	.	.	Name _____
.	Occupation _____	.	.	Occupation _____
.	Address _____	.	.	Address _____
.	_____	.	.	_____

I, Mr./Ms. \_\_\_\_\_ [Nominee/appointed on behalf of minor  
Nominee/Approved Claimant(s)], hereby acknowledge the receipt of articles comprised in and set  
out in the above inventory together with a copy of the said inventory.

1. Mr./Ms. \_\_\_\_\_  
Nominee(s)/Approved Claimant(s) Signature(s)

2. Mr./Ms. \_\_\_\_\_  
Appointed on behalf of minor Nominee Signature (s)  
Natural Guardian/Natural Approved  
Claimant(s)

Place:

Date:

**13. The format for monthly reporting of claims in respect of deceased customers**

Region (A)	Branch Name (B)	Customer Name / Account # / Locker # (C)	Date of receipt of claim (D)	Details of claim (E)	Type of claim (F)	Date of settlement of claim (G)	Reasons for delay (to be given if the date of settlement of claim (Column G) is greater than 15 days from the date of receipt of claim (Column D) (H)

### 14. Format of Letter of Indemnity – Missing persons

(To be taken on stamp paper of requisite amount/or franking to be done of requisite amount)

To,

HDFC Bank Ltd.

\_\_\_\_\_

\_\_\_\_\_

IN CONSIDERATION OF your paying or agreeing to pay the balances, delivering or agreeing to deliver contents of safe deposit locker, articles kept in safe custody, shares & securities in safe custody held at the credit of and/or in the name of \_\_\_\_\_, the missing as mentioned hereunder:

Account No.	Nature of Deposit	Balance/Principal Amount					
Safe Deposit Locker No./Sealed Box in Safe Custody Account No.	Details of the Inventory of the Locker/Articles in Safe Custody						
	Description	Weight					
	Value						
Shares/ Securities Custody A/c. No.	Details of Shares & Securities						
Date of issue	Name of	Distinctive	Folio	No. of	Face	Total	Total

	the Company	Nos.	No.	Shares/ Securities	Value	Face Value	Market Value as on
	---						

without production of Letters of Administration or a Succession Certificate to his/her estate or a certificate from the Controller of Estate Duty to the effect that estate duty has been paid or will be paid or none is due.

I \_\_\_\_\_ being the nominee of the missing , and, do hereby, for myself and our heirs, legal representatives, executors and administrators, jointly and severally, UNDERTAKE AND AGREE to indemnify you and your successors and assigns against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred by you by reason or in consequence of your having agreed to pay/or paying the said sum as aforesaid, having delivered or agreed to deliver the above mentioned assets to the nominee.

Signed, sealed and delivered by the above named on this \_\_\_\_\_ day of \_\_\_\_\_ Two thousand \_\_\_\_\_ at \_\_\_\_\_.

Signed and Delivered

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

(Heirs of the Deceased)

### 15. Format of Letter of Indemnity (joint holders) – Missing persons

(To be taken on stamp paper of requisite amount/or franking to be done of requisite amount)

To,

HDFC Bank Ltd.

\_\_\_\_\_

\_\_\_\_\_

IN CONSIDERATION OF your paying or agreeing to pay the balances, delivering or agreeing to deliver contents of safe deposit locker, articles kept in safe custody, shares & securities in safe custody held at the credit of and/or in the name of \_\_\_\_\_, the missing as mentioned hereunder:

Account No.	Nature of Deposit	Balance/Principal Amount					
Safe Deposit Locker No./Sealed Box in Safe Custody Account No.	Details of the Inventory of the Locker/Articles in Safe Custody						
	Description	Weight					
	Value						
Shares/ Securities Custody A/c. No.	Details of Shares & Securities						
Date of issue	Name of the Company	Distinctive Nos.	Folio No.	No. of Shares/ Securities	Face Value	Total Face Value	Total Market Value

							as on
	---						

without production of Letters of Administration or a Succession Certificate to his/her estate or a certificate from the Controller of Estate Duty to the effect that estate duty has been paid or will be paid or none is due.

I/We of the 1st Part – **(Name of Joint Holder/s)**

- 1)
- 2)
- 3)
- 4)
- 5)

being the claimant(s) of the missing , do hereby, for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally, UNDERTAKE AND AGREE to indemnify you and your successors and assigns against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred by you by reason or in consequence of your having agreed to pay/or paying the said sum as aforesaid, having delivered or agreed to deliver the above mentioned assets to the claimant(s) of 1st Part.

Signed, sealed and delivered by the above named on this \_\_\_\_\_ day of \_\_\_\_\_ Two thousand \_\_\_\_\_ at \_\_\_\_\_.

Signed and Delivered

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

(Heirs of the Deceased)

Signed and Delivered

by the above named

## 16. Claim application from legal heirs of Missing persons

The Branch Manager,  
HDFC Bank  
\_\_\_\_\_ Branch

Dear Sir,

### Re: Claim for Balances and Other Assets

I/We, the undersigned, hereby declare that Shri /Smt \_\_\_\_\_ is missing since \_\_\_\_\_.

\*

I/We am/are the rightful legal heir(s) of \_\_\_\_\_, entitled to

- a) receive the amount due on the deposit(s) detailed below
- b) receive the contents of safe deposit locker(s)/articles in safe custody
- c) shares/securities held in safe custody

Accordingly, I/We hereby submit my/our claim and furnish the requisite particulars/ documents/indemnities, etc. as prescribed by the bank.

1	Full name of the missing account holder	
2	Details of Deposit Account(s)	Account Number Balance

3.	Details of Safe Deposit Locker(s)			
4.	Details of Articles in Safe Custody			
5.	Details of Shares & Securities in Safe Custody			
.				
6.	Details of Overdrafts, if any			
7.	Particulars of all the legal heir(s) (other details for each legal heir are given in enclosed Annex 7	Name	Age	Relation to the Missing person
8.	Are there any other claimant(s)/heir(s) other than those mentioned above and joining in the Indemnity Bond who are also entitled to the share in the property left by the missing person as per the Personal Laws applicable .?			
.				
11.	If the missing person was married,			

	did he/ she leave a spouse and/or a child or Any minors? If so, is there a legal or natural guardian?	
12.	'If the missing person did not leave a spouse and a child or children or issue, did he/she leave him/her surviving any parent, "brother, sister or children of a brother, or sister ?	
13.	Is the property left by the missing person a part of the Joint Hindu Undivided Family property? If yes, who was and is the Karta of HUF	
14.	Are there any unsatisfied creditors? If so, state the names with amount claimed. If not, state accordingly.	
.	.	
15.	What is the position regarding liability to and payment of Estate Duty, Income-tax, Sales tax and other Government dues?	
16.	Has the missing person-left any other assets? It so, who is/are the claimants having acquired title to such assets?	
17.	Was the missing person doing any business or was he in service? If the service, was he entitled to any provident Fund? If he was whom did he nominate to receive such Provident Fund? Have Provident Fund dues been paid? If so, to	

	whom?	
18.	Was the life of the missing person insured? If so, to whom have the moneys been paid? Was there a nomination or assignment in respect of the assurance moneys? If so, to whom?	
19.	Proof of claimant(s)' right to claim the amount lying to the credit of the missing person and other assets with the bank, in the absence of the representations to the estate of the missing person	
20.	Name of sureties offered (Particulars of sureties and Declarations from them are furnished in the enclosed formats 'annex 5 & 6')	1. 2.
21.	Whether the claimant(s) has/have any liability (for advance raised from the Bank) or indirect liability (as guarantor for advance raised by others), If so, please state the amount and name of the borrowers. If not, state accordingly.	
22.	Whether the claimant(s) is/are in possession of Cheque Book(s)/ ATM Card/Deposit Advice/Locker Key/Safe Custody Receipt, etc. Furnish details and enclose these.	
23.	If not, the reasons why the	

	claimant(s) is/are not in possession of these items	
---	---	
24.	How did the claimant(s) come to know the details of above referred accounts and other banking relationships of the missing person	
25	Any other facts which the applicant(s) want(s) to state in support of his/her/ their claim	

I/We hereby declare that the above statements and answers are true. I/We, the undersigned, are aware that the claims in respect of missing persons are dealt with the provisions of section 107/108 of the Indian Evidence Act. I/We hereby enclose a) copy of the FIR b) Non traceable report issued by the police authority \*c) court decree- presumption of death and d) an Indemnity Agreement signed by me/all of us along with our sureties. I/We request that bank to –

pay the balances,

deliver the contents of safe deposit locker,

articles in safe custody,

shares & securities in safe custody,  to –

1) Name: \_\_\_\_\_

2) Name: \_\_\_\_\_

Who is/are hereby irrevocably authorised by me/us to receive the above stated sums/other assets and give a valid discharge/receipt (binding me/all of us) to the bank.

I/We also enclose a separate Letter of Disclaimer in Annex 4' prescribed by the bank.

I/We hereby authorise the bank to recover the outstanding, together with interest thereon, any overdraft/loan account standing in the name of the missing person. The bank may also recover the

outstanding service charges, or any other dues payable by the missing person.

I/We request the bank to kindly sanction my/our claim made above.

Name of Claimant(s)

Signature of Claimant(s)#

1. \_\_\_\_\_

X \_\_\_\_\_

2. \_\_\_\_\_

X \_\_\_\_\_

3. \_\_\_\_\_

X \_\_\_\_\_

4. \_\_\_\_\_

X \_\_\_\_\_

5. \_\_\_\_\_

X \_\_\_\_\_

#Thumb Impression of claimant (if illiterate)

Name of the Claimant(s) \_\_\_\_\_

Witness for Thumb Impression

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Note:

In case the claimant is illiterate, he/she should affix his/her Thumb impression in the specimen for signature of the claimant, which should be witnessed by a person known to the Bank.

(Following declaration to be given by the claimant who is illiterate or who does not understand English)

"I declare that above questions were explained to me and the answers thereto have been recorded at my instance as per my instructions and the same have been read over to and understood by me and that I have affixed my signature/thumb impression hereinabove after satisfying myself that they been correctly recorded".

Witness

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of the Claimant(s)

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

**17. Form "A" Letter of Disclaimer (for missing persons)**

The Branch Manager,  
HDFC Bank  
\_\_\_\_\_ Branch

Dear Sir,

**Re: Refund/Delivery of Balance and Other Assets belonging to the Deceased**

Our \_\_\_\_\_ Shri/Smt. \_\_\_\_\_ who holds the following accounts/assets with you is missing since \_\_\_\_\_.

Account No./Locker No./ Safe Custody No., etc.	Balance
---	.
.	.
---	---
---	---

I/We, the undersigned, along with Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ has/have applied to you for refund/delivery of the amount(s) outstanding in the above account(s) and delivery of the contents of locker(s), articles in safe custody, shares & securities in safe custody.

I/We hereby authorise Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ to receive the claim money/assets detailed above on our and their own behalf. I/We declare that the claimant Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ is/are the legal representative entitled to receive the amount of deposit/other assets in the name of the

missing and that I/We have no objection, if the Bank in pursuance of the request by me/us, refunds/delivers the amount/assets to him/her/them.

Thanking You,

Yours faithfully,

Name	Age	Signature
_____	_____	<b>X</b> _____
_____	_____	<b>X</b> _____
_____	_____	<b>X</b> _____
_____	_____	<b>X</b> _____
Address_____		
_____		
_____		

**18. Format of declaration by Guarantors (for missing persons)**

The Branch Manager,  
HDFC Bank  
\_\_\_\_\_ Branch

Dear Sir,

**Re: Refund/Delivery of Balance and Other Assets belonging to the Missing Person.**

Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ has/have been authorised by the legal heir(s) of the missing person Shri/Smt. \_\_\_\_\_ to receive from your Bank the refund of the amount, contents of safe deposit lockers, articles in safe custody and/or shares & securities in safe custody held in the name of the missing. Shri/Smt. \_\_\_\_\_, to the best of my/our knowledge, is survived by the following heir(s) including the claimant(s) named above.

Name	Age	Relation to the Deceased
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I/We express my/our willingness to stand as guarantor(s) for the above request of the claimant(s) Shri/Smt. \_\_\_\_\_ and Shri/Smt. \_\_\_\_\_ and to execute necessary documents in favor of the Bank, should the Bank propose to accede to the said request(s).

Thanking you,

Yours faithfully,

Signature <b>X</b> _____	Signature <b>X</b> _____
Name _____	Name _____
Address _____	Address _____
_____	_____

**19. Information to be furnished by the proposed Guarantors (for missing persons)**

1.	Full Name	
2.	Office Address	
3.	Residence Address	
4.	Monthly Salary/Income	Rs.
5.	How long employed in the present job or business or professional years	
6.	Annual Income (please enclose salary certificate or assessment order)	
7.	Provident Fund	Rs.
8.	Life Insurance	Rs.
9.	Liability to the Bank(s)	As Borrower Rs. As Surety Rs.
10.	Banking Relations	Type of Account: Account No. : Since : Branch : Present Balance : Rs. Average Balance : Rs.
11.	a) Relationship with Claimant	
	b) Relationship with Missing Person.	

Signature X \_\_\_\_\_

**20. Information about Co-heirs of the missing persons (Please use separate forms if there is more than one Co-heir)**

1.	Name of the Co-heir	
2.	Occupation	
3.	Office Address	
4.	Home Address	
5.	Income (per month)	Rs.
6.	Relation with Missing person	
7.	Banking Relations	Type of Account: Account No. : Since :

		Branch : Present Balance : Rs.
--	--	-----------------------------------

Date: \_\_\_\_\_

Signature: X\_\_\_\_\_

**21. Format of Letter of Indemnity without nomination - Missing persons**

(To be taken on stamp paper of requisite amount/or franking to be done of requisite amount)

To,

HDFC Bank Ltd.

\_\_\_\_\_

\_\_\_\_\_

IN CONSIDERATION OF your paying or agreeing to pay the balances, delivering or agreeing to deliver contents of safe deposit locker, articles kept in safe custody, shares & securities in safe custody held at the credit of and/or in the name of \_\_\_\_\_, the missing as mentioned hereunder:

Account No.	Nature of Deposit	Balance/Principal Amount
Safe Deposit Locker No./Sealed Box in Safe Custody Account No.	Details of the Inventory of the Locker/Articles in Safe Custody	
	Description	Weight

	Value						
Shares/ Securities Custody A/c. No.	Details of Shares & Securities						
Date of issue	Name of the Company	Distinctive Nos.	Folio No.	No. of Shares/ Securities	Face Value	Total Face Value	Total Market Value as on
	---						

without production of Letters of Administration or a Succession Certificate to his/her estate or a certificate from the Controller of Estate Duty to the effect that estate duty has been paid or will be paid or none is due.

I/We of the Ist Part – **(Name of Claimants)**

- 1)
- 2)
- 3)
- 4)
- 5)

being the claimant(s) of the missing, and

I/We of the IIInd Part – **(Guarantor/s)**

- 1)
- 2)

being the guarantor(s) for the claimant(s) of the Ist Part, do hereby, for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally, UNDERTAKE AND AGREE to indemnify you and your successors and assigns against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred by you by reason or in consequence of your having agreed to pay/or paying the said sum as aforesaid, having delivered or agreed to deliver the above mentioned assets to the claimant(s) of Ist Part.

Signed, sealed and delivered by the above named on this \_\_\_\_\_ day of \_\_\_\_\_ Two thousand \_\_\_\_\_ at \_\_\_\_\_.

Signed and Delivered

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

(Heirs of the Deceased)

Signed and Delivered

by the above named

1. X \_\_\_\_\_

2. X \_\_\_\_\_

(Guarantors)

