

**Claim cum Identification form to be submitted by nominee of deceased depositors
Joint deposit A/c – where nomination is crystallized**

From,
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.....
.....

Date:-

To,
Branch Manager
Dombivli Nagari Sahakari Bank Ltd.
..... Branch

Dear Sir,

Reg.:- Application for claim settlement of deposit A/c with your bank of late

- (i) **Shri/Smt.**
- (ii) **Shri/Smt.**
- (iii) **Shri/Smt.**

I advise the sad demise of above named depositors on (i)
(ii).....(iii)

They hold Deposit Accounts with your Branch as detailed below.

.....
.....

2. I, Shri /Smt. residing
at..... and

(i) the registered nominee in above deposit account (s)

OR

(ii)the person authorized to receive the payment on behalf of Master / Miss Who is the nominee in the above account and is minor as on date of this claim.

Please settle the balance in the account in the name of the nominee. I submit photocopy of following document(s) together with original. Please return the original to me after verification.

(i)Death Certificates issued by

(ii)Identity proof * (PAN Card/Elections ID/Pass port/RTO Licence and with latest photograph.

Please release the amount by Issuing Pay order/DD payable at/Credit the sum to my SB A/c No. with your Bank.

Yours faithfully

.....

Shri/Smt.
(Nominee)

Place

Date

*In the event, Satisfactory proof of identification is not available, nominee/ the person authorized to receive the payment on behalf minor nominee can furnish witness of Magistrate/Judicial Officer, or an officer of Central / State Government/ an Officer of the Bank or Two responsible persons acceptable to Bank.