

DEATH CLAIM SETTLEMENT FOR DEPOSITS

(Simplified Procedure for individuals)

1. **DOCUMENTS REQUIRED:** As a matter of general rule following documents are required in all cases of death claim:
 - i. Death Certificate.
 - ii. Application for Deceased claim(Annexure I) /Estate claim form (Annexure II) duly filled in by the legal heirs/claimants.
 - iii. KYC of Claimants/Legal heirs/Nominee.

2. **CLAIM IN THE ACCOUNT OF A DECEASED ACCOUNTHOLDER WILL BE SETTLED IN THE FOLLOWING ORDER:**
 - a. **Payment to Nominee** - If there is valid nomination, payment will be made to the nominee after proper due-diligence.

 - b. If valid nomination is not available - then
 - i. Payment to legal heirs on production of legal representation /probated will/Letter of administration/Succession certificate. When a Legal Representation/court order is produced, Bank shall make payment to the persons mentioned therein as per terms of legal representation.

 - ii. When there is no legal representation / probated will/Letter of administration/Succession Certificate - then Payment will be done to legal heirs based on documents mentioned hereunder and the documents mentioned in point no. 1, if all the legal heirs join together as per his/her personal law.

Claims Up to inclusive of Rs.5000/-

A declaration/undertaking in prescribed format (To be stamped as an agreement) Annexure-X.

Claims Above Rs.5000/- Up to & inclusive of Rs.50,000/-

- i. Affidavit in prescribed format to be executed by all the legal heirs (To be executed before a Notary/Magistrate on Non-Judicial Stamp) Annexure-VII.
- ii. Indemnity Bond in prescribed format to be executed by all the legal heirs along with two sureties of adequate means (To be stamped as per local laws) Annexure VIII.
- iii. Legal Heir Certificate issued by revenue authority (Not Mandatory).

- iv. If the claim amount is Rs. 25000/- or less, a letter of Indemnity (in prescribed format Annexure-VI-G) instead of indemnity bond, executed by all the legal heirs along with two sureties can be submitted. (To be stamped as an agreement - Need not be signed before Notary or Magistrate).
- v. Wherever the claimants are finding it difficult/not able to obtain legal heir certificate from the revenue authorities, following additional documents are required:

A declaration in prescribed format (Annexure-IX) to be obtained from respectable person/s well known to the deceased depositor's family and the bank, preferably an existing depositor of the bank, to the effect that the claimants are the only legal heirs of the deceased. (To be stamped as an agreement - Need not be signed before Notary or Magistrate)

Claims Above Rs.50,000/-

- i. Affidavit in prescribed format (Annexure-VII) to be executed by all the legal heirs (To be executed before a Notary/Magistrate on Non-Judicial Stamp paper).
- ii. Indemnity Bond in prescribed format (Annexure-VIII) to be executed by all the legal heirs along with two sureties having means equal to the claim amount. (To be executed before a Notary/Magistrate on Non-Judicial Stamp).
- iii. Legal Heir Certificate issued by revenue authority

Wherever the claimants are finding it difficult/not able to obtain legal heir certificate from the revenue authorities, following additional documents are required:

- A declaration in prescribed format (Annexure-IX) to be obtained from respectable person/s well known to the deceased depositor's family and the bank, preferably an existing depositor of the bank, to the effect that the claimants are the only legal heirs of the deceased. (To be stamped as an agreement - Need not be signed before Notary or Magistrate).

Although the procedure for settlement of death claims has been simplified, in order to avoid unnecessary delay in settlement of death claims all account holders including joint accounts, with or without "Either or Survivor" mandate are advised to avail nomination facility.

***In case on any dispute, it is advisable to get court order for settlement of claim.**

***For Further Detail Please Contact Branch Head.**

Application for Deceased Claim

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

From

To

The Branch Manager,
Union Bank of India

_____ 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 is in the name(s) _____ of:

A. In case of Nomination

I, son/daughter of Shri residing at.....

..... am

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

(ii) 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 the claim.

Please settle the balance in the account in the name of the nominee. I/We receive the payment as trustee(s) 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)}

ESTATE CLAIM FORM

UNION BANK OF INDIA

Dear Sirs,

ESTATE OF THE LATE_____

I/We give hereunder the necessary particulars concerning my/our claim against the Bank in respect of the estate of the above named deceased. I/We shall furnish any further information that the Bank may desire in this regard. I/We declare that the under-mentioned particulars furnished by me/us are true to my/our knowledge and belief and agree that I/We shall be jointly and severally liable to you for any misrepresentation or suppression of material fact and indemnify you against any demand made on you by any other person claiming under or in the right of the above named deceased for or in respect of monies/shares claimed by me/us herein.

Yours faithfully,

1. Name_____	Signature_____
2. Name_____	Signature_____
3. Name_____	Signature_____
4. Name_____	Signature_____
5. Name_____	Signature_____
6. Name_____	Signature_____

Date:

Place:

 1. Full Name of the Deceased :

2. Permanent address (Last)

3. Date of Death

4. Evidence of Death

 (Particulars of A/c to which claim refers)

5. Type of Account

7. Address registered with Bank

8. Value of claim with Bank (state balance in the a/c or No. of shares held)

9. Particulars of claimants / heirs

<u>Name in full</u>	<u>Age</u>	<u>Relationship with deceased</u>
1.		
2.		
3.		
4.		
5.		
Address		

10. Other Assets left by the deceased

	<u>Value</u>
Immovable property	Rs.
Shares & Securities	Rs.
Investment in business	Rs.
Other Assets	Rs.

11. a) Has the deceased left any will?

b) Has Estate Duty Discharge Certificate been obtained?

c) Has any Probate/letters of Administration or Succession Certificate to the estate of the deceased been obtained?

d) Executors/Successors/Administrators of/to the estate of the deceased

	<u>Names</u>	<u>Occupation</u>
(i)	_____	_____
(ii)	_____	_____
(iii)	_____	_____
(iv)	_____	_____

Address: _____

12. Documents enclosed for registration and return (Please furnish originals)

- (i) Municipal Death Certificate
- (ii) Estate Duty Discharges Certificate
- (iii) Legal Representation to the estate of the deceased (see item 10© above)
- (iv) _____
- (v) _____

13. If claimants desire payment against an indemnity Bond, please give following particulars regarding proposed sureties (two)

- i) Name : _____
- Address : _____

Occupation:
Banker's name:

- ii) Name :
Address :
Occupation:
Banker's name:
-

FOR OFFICE USE ONLY (not to be filled in by the claimants)

- a) Title of account :
- b) Nature of Account : CD/SB/FDR/SDV LOCKERS/Individuals/Jt. Account Holder
- c) Status of Deceased : HUF/Proprietor/Partner/Trustee
- d) Mandate for operation of a/c (Reproduce verbatim from A.O.F.)
- e) Date of A/c opened AB(Average balance) PB(Present
balance):
- f) Deceased's liability to Bank
(State limits outstanding)
(Securities held if any)

SANCTIONING AUTHORITY

(To be stamped as an agreement)

LETTER OF INDEMNITY WITH RESPECT OF PAYMENT OF BALANCE IN THE DECEASED
CONSTITUENT'S ACCOUNT WITHOUT PRODUCTION OF LEGAL REPRESENTATION

To
Union Bank of India

In CONSIDERATION of your agreeing to pay and/or paying me/us -----
------(insert here names of heirs of the deceased)-----
-----the sum of Rs. -----(Rupees-----) standing at
the credit of Current/Savings/Deposit Account no.-----with your bank in the
name of-----since deceased, without production of letters of
administration/succession certificate to his/her estate, I/We,------(state here the
names of the heirs of the deceased)-----and -----(state here the
names of the sureties) do hereby for ourselves and our heirs, legal representatives,
executors and administrators, jointly and severally AGREE AND UNDERTAKE to indemnify
you and your successors and assigns and keep them indemnified 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 having agreed to pay/or paying me/us, the
said sum as aforesaid.

Signed, Sealed and Delivered by the above named on this day of -----Two thousand
and-----

Signed and delivered by the above named

(Heirs of the deceased)

Signed and delivered by the above named

(Sureties)

(Need not be signed before Notary or Magistrate)

DRAFT OF THE AFFIDAVIT

(ON Non judicial stamp paper of adequate value)

I/WE-----S/O, W/O, D/O -----
 --Indian inhabitants-----aged-----residing at-----
 -----do hereby solemnly and sincerely affirm/swear and state as follows:

1. Mr./Mrs./Miss.-----died on -----
 ----at----- .We state that I/We have requested Union Bank of India-----
 -----Branch to pay to me/us amounts lying in the account/s of the deceased
 Mr./Mrs./Miss-----
 which are as follows:

Account	Amount (Rs.)
1)	
2)	

The declaration is being made to enable the Bank to settle my/our claim in respect of the above account.

I/We the below named person/s, is/are the only legal heirs/legal representative/s surviving the deceased:

Name	Age	Relationship with the deceased.
1.		
2.		
3.		
4.		
5.		
6.		

I/We further declare that:

- i) the deceased died without leaving a WILL or the deceased has left a WILL dated ----- being his/her last and only will and testamentary disposition whereby the claimants mentioned herein have been bequeathed with the amounts shown

hereinabove (Applicable only where obtaining of a probate from a court of law is not compulsory)

- ii) Apart from the persons mentioned in the claim form submitted by us to the bank and whose names are stated hereinabove, the deceased has not left any other legal heir/legal representative/s.

(Signature of all the legal heir/s/legal representative/s)

Solemnly affirmed at ----- the -----
day

of----- 20----

ME

BEFORE

(SEAL)

Notary/Magistrate

DRAFT OF THE INDEMNITY BOND
(On non-judicial stamp of adequate value)

In consideration of Union Bank of India (hereinafter called the "Bank") having agreed to pay the undersigned-----
----- inhabitant/s of -----
-----the amount of Rs.-----
(Rupees.....) lying to the credit of Current
account No.-----/Savings Bank No.-----/Deposit account no.-----
-----in the name of ----- with the -----
-----Branch of the said bank on the strength of representation made by the said-----
-----as the only surviving heir/s/legal representative/s of the said
----- (who died on -----) that he/she/they is/are solely entitled to the same
without insisting on succession certificate/probate/letter of administration or other
legal representation to the estate of the said deceased or a certificate from the
Controller of Excise Duty to the effect that the estate duty has been paid or will be paid
or none is due.

I/We-----, the undersigned-----as principals
and-----as
sureties

for themselves, their heir/s, executors and administrators do hereby covenant from time
to time and at all times, hereafter to save, defend and keep harmless and indemnified
the said bank, its successors and assigns of from and against all actions, suits,
proceedings, accounts, claims and demands for or in respect of the said monies on the
part of any persons or firms claiming under in the right of the said (name of the
deceased)-----and from against all costs, damages and
liabilities in connection there with.

Signed and delivered by the within named

-----as principals
and-----

as sureties

At-----this-----day-----of-----two thousand and-----
-- in the presence of -----

SEAL

NOTARY/MAGISTRATE

To be obtained from respectable person/s well known to deceased family/ Bank

Annexure-IX
(An existing customer is preferable)

**DRAFT OF DECLARATION
(TO BE STAMPED AS AGREEMENT)**

I/We-----S/o/W/o/D/o-----aged---
---residing at -----do hereby solemnly and sincerely declare
and state as follows:

Mr./Mrs./Miss.-----died on-----
---at-----The following persons who are the legal heirs of the said
Mr./Mrs./Miss._____ (deceased) have
claimed the deposits/articles in Safe Deposit Lockers/safe custody held at your Bank.

<u>Name of Legal heirs:</u>	<u>Relationship with deceased</u>	<u>Age</u>
1.		
2.		
3.		
4.		

I/we state that I/we very well know the family members of the said deceased Mr./Mrs./Miss.----- and the above claimants are the only legal heirs of the said deceased.

This declaration is being made to enable the bank to settle claim in respect of above account/s.

Signature:

Name :

Address :

Signature:

Name :

Address :

(To be signed before a Notary/Magistrate)

**DRAFT OF DECLARATION/UNDERTAKING
(TO BE STAMPED AS AGREEMENT)**

I/We-----S/o/W/o/D/o-----aged-----
-----residing at -----do hereby solemnly and sincerely declare
and state as follows:

Mr./Mrs./Miss.-----died on-----
-at-----we state that I/we have requested Union
Bank of India-----Branch to pay to us the amounts lying in the
account/s of the deceased Mr./Mrs./Miss.-----
-----which are as follows:

Account	Amount (Rs.)
1)	
2)	

This declaration is being made to enable the bank to settle my/our claim in respect of above account/s.

I/We, the named persons, is/are the only legal heir/s/legal representative/s surviving the deceased:

- 1.
- 2.
- 3.

I/We further declare that

- i) the deceased died without leaving a WILL

- ii) apart from the persons mentioned in the claim form submitted by us to the bank and whose names are stated hereinabove, the deceased has not left any other legal heir/s/legal representative/s

We hereby undertake to reimburse the bank with the amount involved in the event of any rival claim arising.

(Signature of legal heir/s/legal representative/s)

(Need not be signed before a Notary or Magistrate. Branch Manager to satisfy about the genuineness of the signature)