

Settlement of Claims in respect of Deceased and Missing Customers		
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Annexure – 1

Settlement of Claims in respect of Deceased and Missing Persons

Check-list of Documents to be Obtained

Claims	Document obtained : Yes/ No
1. Accounts / Locker with Nomination / Survivor clause:	
(i) Application for Deceased Claim from Nominee/Guardian of nominee, Survivor (Annexure-2)	
(ii) Copy of Death Certificate (Verified with original)	
(iii) Identity proof of claimant/s	
2. For cased other than Nomination/ Joint Accounts with survivor clause:	
(i) Application for Deceased Claim from legal heirs / others (Annexure-3)	
(ii) Copy of Death Certificate	
(iii) Affidavit & Indemnity Bond from claimant(s) executed on stamp paper of applicable value (Annexure-4)	
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7. Miscellaneous documents as applicable in specific cases:	
(i) Probated Will	
(ii) Letters of Administration	
(iii) Court orders etc.as applicable	

Annexure – 2**Application for Deceased Claim**

(To be used when account / Locker has Nomination or is a Joint account / Locker with Survivor Clause)

From

To

**The Branch Manager,
Unity Small Finance Bank Limited
_____ Branch**

Dear Sir,

Re: Deceased Account

Late Shri/Smt. Account / Locker No. (s)

I/We advise, the demise of Shri/Smt. _____ on _____.
He / She holds the above account(s) /Locker at your branch. The account /Locker 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) / Locker.

(ii) the person authorized to receive payment / the locker contents on behalf of Master/ Miss
..... who is the nominee in the above account(s) / Locker and is a minor as
on the date of the claim.

Please settle / deliver the balance in the account / locker contents in the name of the nominee. I/We
receive the payment / locker contents as trustee(s) of the legal heirs of the deceased.

B. In the case of joint account / locker with Survivor clause:

I/ We request you to delete the name of deceased person and continue the account / locker 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.

Place:

Date :

Death Certificate issued by:

Identity proof (required in nomination cases)

Yours faithfully,

{ Claimant(s) }

Annexure – 3

Application for deceased claim

(To be used for cases Other than Nomination/Joint Account / Locker with Survivor Clause)

From

To,
The Branch Manager
Unity Small Finance Bank Limited
_____ Branch

Dear Sir,

Re: Deceased Account / Locker

Late Shri/Smt. Account / Locker No (s).....

I/We advise, the demise of Shri/Smt. _____ on _____. He/She holds the above account(s) / Locker at your branch. The account / locker is in the name(s) of :

I/We lodge my/our claim for the balances in the account/s with accrued interest lying to the credit of / the contents of the said Locker in the name of the deceased who died intestate. I/We am/are the legal heirs of the above named deceased and lodge my/our claim for payment / contents of the locker 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 Co-parceners with their respective ages.

Full Name/Address	Occupation	Relationship with Deceased	Age

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

I/We hereby solemnly affirm that the above statements are true and correct to the best of my/our knowledge and belief.

Yours faithfully

Signature of Claimant(s) :

Place :

Date :

Sr. No.	Name of the Claimant	Address	Signature

Affidavit & Indemnity Bond

**In respect of payment of balance in deposit accounts /
contents of safe deposit locker of deceased person;
(To be stamped with the applicable duty payable)**

I/We Mr/Ms/Miss
(name/names of the claimants),
(s/o, w/o, d/o), Aged
with Address
do hereby solemnly affirm and state as follows.

1. I/We am/are the legal heirs of Mr / Ms / Miss
(name of deceased account holder) and the deceased is my/our
(father/mother/wife/husband/son/daughter etc.)

2. I/We further state that I/We the following legal heirs are the only legal heirs entitled to claim the balance deposit /amount /jewels / ornaments and other valuables being the contents held in the safe deposit locker:-

Sr.No.	Name	Age	Relationship to the deceased
1.			
2.			
3.			
4.			
5.			

(For deposit accounts)

3. I/We further state that the deceased was holding an account (hereinafter referred to as “the account”) (specify the account details) _____ in _____ branch of Unity Small Finance Bank Limited (herein after referred to as “the Bank”). At the time of the death of the deceased, the account was having a credit of Rs_____ (balance amount in the account) which includes interest upto _____ (date of payment) amounting to Rs._____ (amount being now paid).

4. I/We affirm that I/We am/are the sole legal heirs of the deceased who are entitled to receive the amount standing in the credit of the account belonging to the deceased.

5. I/We have requested the bank to make the payment of the amount standing in the credit of the account belonging to the deceased together with interest thereon as applicable to Shri/Smt. _____ being one of the legal heirs for and on behalf of all the legal heirs.

OR

(For Safe Deposit Locker)

I/We have requested the bank to hand-over contents of the safe deposit locker to Shri/Smt. _____ being one of the legal heirs for and on behalf of all the legal heirs.

6. I/We are aware that the Bank has agreed to settle our claims relying on this affidavit and I/We agree to indemnify the bank in respect of such payment of the amount standing to the credit of the account of the deceased or delivery of the contents of items in safe deposit locker against any claim made by any person

7. I/We for ourselves and my/our respective heirs, executors and administrators jointly and severally agree, affirm and undertake that the bank, its successors and assigns and its managers, agents, officers and servants and their respective estates and effects are and shall from time to time and at all times hereafter be kept safe and saved harmless and indemnified for and in respect of such payment and against all actions, losses, cost, charges, expenses and demands whatsoever in respect of the said payment or delivery of the contents of items in safe deposit locker or held in safe custody.

All the averments made herein before are true and correct and I/We put my/our signature/mark on this _____ Day of _____ 20__ at _____ in the presence of _____

Signatures(s) of deponents. (claimants)

Sr. No.	Name of the Claimant	Address	Signature

WITNESS:

Name:

Address:

.....

.....

Signature

AFFIDAVIT TO BE ATTESTED BY NOTARY PUBLIC.

RECEIPT

Received with thanks from Unity Small Finance Bank Limited _____ branch,
a sum of Rs. _____ (Rupees _____ only) by Banker's
Cheque No. _____ dated _____ in favour of
_____ in full and final
settlement of my/ our claim as successor on the balance in _____ Account(s) No(s)
_____ standing in the name of the deceased Shri/Smt./Kum.
_____. I/We do not have any other
claim from the Bank henceforth.



Place :

Date :

(Signature of all the legal heirs over a revenue stamp)

Declaration in case funds are settled in favour of a Minor

I, _____ father and natural guardian of _____ hereby
certify that the proceeds of your Banker's Cheque No. _____ dated _____
favouring _____ issued by you in settlement of the balance in account
number _____ of Late _____ will be utilized for the benefit of the
minor only.



Place :

Date :

NOTE:

It Is made clear that the settlement of claim is made to survivor(s) / nominee(s) only as a trustee of the legal heirs of the deceased depositor on the condition that such settlement shall not affect the right or claim which the legal heir/s / other legal claimants may have against the survivor(s) / nominee(s).

Annexure-6

Form of Inventory of Contents of Safe Deposit Locker Hired from Banking Company (Section 45ZE (4) of the Banking Regulation Act, 1949) (To be used where there is Nomination or Survivorship clause)

The following inventory of contents of Safe Deposit Locker No. _____ located in the Safe, Deposit Vault of Unity Small Finance Bank Limited, with Branch at _____

* hired by Shri/Smt. _____ (deceased) in his/her sole name.

* hired by Shri/Smt. (i) _____ (deceased),
(ii) _____ Jointly
(iii) _____

was taken on this _____ day of _____ 20__.

Sr No.	*Description of Articles in Safety Locker	Other identifying particulars, if any

[*E.g. Jewellery articles may be described as Yellow Metal / White Metal / White Stone / Red Stone / Blue Stone / Green Stone and so on, Cash (currency, denominations, quantity), documents (description), Miscellaneous]

For the purpose of inventory, access to the locker was given to the Nominee/and the surviving hirers

- By breaking open the locker under his/her/their instructions.
- Who produced the key to the locker.
(Delete whichever is not applicable)

The above inventory was taken in the presence of:

1. Shri/Smt. _____ (Nominee)

Address _____

(Signature)

Shri/Smt. _____ (Nominee)

Address _____

(Signature)

and the Survivors of joint hirers

Shri/Smt. _____

Address _____

(Signature)

Shri/Smt. _____

Address _____

(Signature)

2. Witness(es) with name, address and signature:

Name:

Address:

.....

.....

Signature

Name:

Address:

.....

.....

Signature

ACKNOWLEDGEMENT

* I, Shri/Smt. _____ (Nominee),

* We, Shri/Smt. _____ (Nominee),

Shri/Smt. _____ and Shri/Smt. _____ the survivors of the joint hirers,

hereby acknowledge the receipt of the contents of the safety locker comprised in and set out in the above inventory together with a copy of the said inventory.

Shri/Smt. _____ (Nominee)

Signature _____

Shri/Smt. _____ (Nominee)

Signature _____

Shri / Smt _____ (Survivor)

Signature _____

Shri / Smt _____ (Survivor)

Signature _____

Date: _____

Place: _____

NOTE:

It Is made clear that access to locker is given to survivor(s) / nominee(s) only as a trustee of the legal heirs of the deceased locker hirer on the condition that such access if given to survivor(s) / nominee(s) shall not affect the right or claim which any person may have against the survivor(s) / nominee(s) to whom the access is given.

Annexure – 7

Form of Inventory of Contents of Safe Deposit Locker Hired from Banking Company (To be used where there is No Nomination or Survivorship Clause)

The following inventory of contents of Safe Deposit Locker No. _____ located in the Safe Deposit Vault of Unity Small Finance Bank Limited having Branch at _____,

* hired by Shri/Smt. _____ (deceased) in his/her sole name.

* hired by Shri/Smt. (i) _____ (deceased),
(ii) _____ Jointly
(iii) _____

was taken on this _____ day of _____ 20____.

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 legal heir(s)/a person mandated by the legal heir(s) and surviving hirers

For the purpose of inventory, access to the locker was given to the Nominee/and the surviving hirers

- By breaking open the locker under his/her/their instructions.
- Who produced the key to the locker.
(Delete whichever is not applicable)

The above inventory was taken in the presence of :

Legal heirs of deceased joint hirer(s) / person mandated by legal heirs

Shri/Smt. _____
Address _____

(Signature)

Shri/Smt. _____
Address _____

(Signature)

and Survivors of Joint hirers

Shri/Smt. _____

Address _____

(Signature)

Shri/Smt. _____

Address _____

(Signature)

3. Witness(es) with name, address and signature:

Shri/Smt. _____

(Signature)

Address _____

Shri/Smt. _____

(Signature)

Address _____

ACKNOWLEDGEMENT

* I, Shri/Smt. _____ legal heir / mandate holder

* We, Shri/Smt. _____

_____ legal heirs and

Shri / Smt. _____

_____ Surviving Hirers

hereby acknowledge the receipt of the contents of the safety locker comprised in and set out in the above inventory together with a copy of the said inventory.

Shri/Smt. _____

(Legal Heir/Mandate Holder)

Signature:

Shri/Smt. _____

Signature:

Shri/Smt. _____

Signature:

Shri/Smt. _____

Signature:

Date: _____

Place: _____

(*Delete whichever is not applicable)