

Application for Deceased Claim from Legal Claimant**[Holder of Succession Certificate, or Letter of Administration, Court Order or Probate of Will]****From**

ToThe Branch Head Axis
Bank Ltd.

Branch**Dear Sir,**

Re: Deceased Account

Late Shri/Smt.

Account No(s).

Term/Fixed Deposit No(s).

I/We advise the demise of Shri/Smt.

 on

. He/she, they hold the above account(s)/term/fixed deposit(s) at your branch. The account(s)/term/fixed deposit(s) is/are in

 with MOP as

I/We submit photocopy of the following document(s) together with originals. Please return the original to us after verification.

- i. Death Certificate issued by

- ii. Identity proof (required in nomination cases)

I,

 son/ daughter/ Wife of Shri

 residing at

 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) with the Bank in the name of

 the deceased.

I/We lodge my / our claim for the above balances with accrued interest of the above-named deceased in terms of legal representation by way of: **(Select whichever is applicable)**

☐ Will of the late Shri / Smt. / Kum.

 dated

 and a Probate granted by the Court of

 at

 dated

 (Copy enclosed).

☐ Succession Certificate dated _____ granted by the Court
of _____ at _____ **(Copy Enclosed).**

☐ Letters of Administration No _____ dated _____ issued by Court
of _____ at _____ **(Copy enclosed).**

☐ Court order No _____ dated _____ issued by Court of
_____ at _____ **(Copy enclosed).**

Accordingly, I hereby submit my claim and furnish the requisite particulars / documents for deceased claim settlement for payment as per the Bank's rules & discretion.

I am / We are aware that the deceased holder had certain outstanding amounts ("Outstanding Dues") payable to the Bank in relation to certain credit facilities availed by him/ her and/ or certain other dues payable to the Bank. I / We hereby authorise the Bank in exercise of its right to lien and set-off in accordance with the terms of the loan agreement executed, to deduct the Outstanding Dues from the total available balance held by the deceased holder in the aforesaid account(s)

I/We hereby confirm and acknowledge that any transaction(s) conducted (if any) between the date of the customer's death and the date of the intimation of the customer's death to the bank are known to me/us. I/We fully accept and assume all responsibility for such transaction(s) and agree to hold the bank harmless from any and all claims, disputes, or legal actions arising in the future in relation to these transactions.

Pay the Proceed by: -

DD to be issued in favour of: _____ **or**

Axis Bank A/c No for fund Transfer: _____

I/We lodge our deceased claim settlement for payment as per the Bank's rules & discretion.

My/our contact details is/are as below:

Name of the Claimant : _____

Mobile Number of Claimant : _____

Email id of Claimant : _____

I hereby authorise Bank to send communication regarding claim settlement related to above mentioned account(s) to my contact number/email id mentioned herewith.

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

Place: _____

Yours faithfully,

Date: _____

(Claimant(s))

For Office Use

Documents Received Date: - _____

Name of Deceased Customer: _____ **CIF:** _____

Date of Death: _____ **Date of Intimation to Bank:** _____

Name of Claimant(s): _____

Certification by Branch Head:

Certified that due diligence and discrete enquiry have been made to identify the claimant(s).

All the documents have been verified with the original (wherever applicable).

Branch has done discreet enquiry about the genuineness of the order and certified copy of the Order.

☐ Claimant name as per system is _____ and as per OVD proof is _____, Due diligence is done and we confirm that both the persons are same (in case of name mismatch)

☐ Deceased name as per system is _____ and as per Death Certificate is _____, Due diligence is done and we confirm that both the persons are same. (in case of name mismatch)

Signature:

Signature:

(Sign Verification / Prepared by BOH)

(Approved by Branch Head)

Grade:

Grade:

Employee code:

Employee code:

Documentation required for Deceased Claim Settlement

Deceased claim settlement through legal representation	<p>Death Certificate</p> <p>Probated will/Succession Certificate/ Court Order/ Letter of Administration Received</p> <p>Claim Form (Annexure- 4 A)</p> <p>OVD of Claimant/s</p> <p>SB Account Closure Form</p> <p>In case of FD, FD Receipt or FD advice(as applicable) signed by claimant/s</p> <p>Annexure - 7 Receipt – To be collected from claimant once the settlement is done.</p>
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