<u>Application for Deceased Claim</u>
(To be used when account has nomination or is a joint account with survivor clause)

From		
To The Branch Manager, CTBC Bank Co., Ltd. Branch		
Dear Sir,		
Re: Deceased Deposit Account Late Shri/Smt Account No (s) I/We advise the demise of Shri/Smt He/She holds the above deposit account of:	on ount(s) at your branch. The account is in the name(s)
A. In case of Nomination		
I,	son/daughter of Shri	
• •	ove account(s). payment on behalf of Master/Miss d is a minor as on date of this claim.	
Please settle the balance in the according to the legal heirs of the deceased.	unt in the name of the nominee. I/We receive the pa	syment as trustee(s)
B. In case of Joint Account		
I/We request you to delete the name same mode of operations.	of deceased person and continue the account in my	v/our name(s) with
I/We submit photocopy of the follous after verification.	wing document(s) together with originals. Please re	eturn the original to
Death certificate issued by	on cases)	
Place: Date:	Yours faithfully.	,
	(Claimant(s)))

Appliacation for Deceased Claim

(To be used for cases other than nomination / joint account holders with survivor clause)

From		
То		
The Branch Manager		
CTBC Bank Co., Ltd. Branch		
Dranch		
Dear Sir,		
Re : Deceased Deposit Account Late Shri/Smt		
Account No (s)		
	/Smtaccount(s) at your branch. The account	
named deceased who died intestate lodge my/our claim for payment a except us no other person is the le	balances with accrued interest lying to a. I/ We am/are the legal heirs of the above sper the bank's rules and discretion. It is gal heir of deceased and cannot claim ation about the deceased and the legal her	ove named deceased and /We further declare that any share in the amount
1. Names in full of the parents of the	e deceased:	
a) Father:		
b) Mother:		
2. Religion of the deceased:		

3. Details of living (a) Husband (b) wife (c) Children (d) Father (e) Mother (f) Brothers (g) Sisters (h) Grand Children. If Hindu Joint Family, the name and address of the Karta and Co-parceners with their respective ages

			Relationship with	
S.No	Full Name/Address	Occupation	the deceased	Age
1				
2				
3				
4				
5				
6				

4.	Name(s) of the	Guardian(s) of the
	minor Children	of the Depositor

(a) Whether Natural Guardian : Yes /No

(b) Whether Guardian appointed by a court of Law in India. If yes

attach a certified copy of such Order

(c) Name and full particulars of the custodian of the Minor Children

5. Claimant(s) names/s and address in full:

SI NO	Full Name (s) of Claimant(s)	Full address with telephone/mobile numbers of the claimant(s)
1		
2		
3		
4		
5		
6		

I/We	submit	the	following	documents.	Please	return	the	originals	death	certificate	to	us	after
verifi	cation:												

1.Dea	th certii	ticate	(Orıgınal +	· I photocopy) issued by	÷

2. Letter of indemnity.

3. Affidavit.	•		

4. Legal heirship Certificate :_____

We request you to pay the balance amount lying to the credit	of the account(s) of the above named
deceased to Shri/Smt	on my/our behalf.
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)

SINO	Claimant	Signature
1		
2		
3		
4		
5		
6		

Place: Date: Letter of Indemnity with respect to payment of balance in the deceased constituent's account without production of legal representation

The Branch Manager CTBC Bank,
Branch
In consideration of your paying or agreeing to pay me/us.
Name of Claimants: 1
2
3
The sum of Rupees standing at the credit of Savings Bank /Current Account No with your bank in the name of Shri/Smt/Kum
since deceased, without production of Letter 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 do hereby for myself/ourselves and my/our heirs, legal representatives executors and administrators, jointly and severally UNDERTAKE AND AGREE to indemnify you and your successors and assign against all claims, demands, proceeding, losses, damages, charges and expenses which may be raised against or incurred by you by reasons or in consequences of your having agreed to pay or paying me/us the said sum as aforesaid.
Signed and delivered By the above named on thisday of Two thousand
Signed and delivered By the above named
1
2
3(heirs/claimants of the deceased)
ineirs/claimants of the deceased)

RECEIPT

Received with thanks from CTBC Ba	Branch, a sum of Rs					
(Rupees	only)	by	Banker's	cheque	No	dated
in favour of			in fu	ull and fi	nal settlen	nent of my/our
claim as successor on the balance in			Accou	ınt (s) No	(s) standin	g in the name/s
of the deceased Shri/Smt/Kum		I/	We do not	have any	other clain	n from the bank
henceforth.						
Place:						
Date:			(sign	ature of a	ll the legal	heirs)
			O	ver a Rev	enue Stam	p
DECLARATION in case claims are s	settled ir	ı favo	our of a Min	or		
I, father a	nd natui	ral gı	ardian of			hereby certify
that the proceeds of your banker's						
issued by y	_					_
of late						
Place:						
Date:						
			S	Signature		