

Annexure 2

APPLICATION FORM

(To be used for settlement of deceased claim in cases other than Nomination, Joint account without survivorship mandate as Either or Survivor ("E or S"), Former or Survivor ("F or S"), Latter or Survivor ("L or S") or "Any One or Survivor")

From

<Address>_
<Contact No:>_
<Email Id> _____
Date: _____

To,
The Branch Manager,
ICICI Bank Limited,
_____ Branch

Dear Sir/Madam

Claim for payment of balances in the account(s) of Late Mr./Mrs/Master/Miss _____, expired on _____.

1. I/We regret to inform you the demise of Mr./Mrs/Master/Miss _____ on _____.

2. He/ She was maintaining the following account(s) in your branch.

S. No.	Type of Account/deposit	Account No.	Amount*	Date of Maturity (in case of term deposits)	Nature of liability to the Bank (if any)	Amount*
Total Deposit Amount					Total Amount	

(* the actual amount of claim with accrued interest will be worked out on the date of payment)

3. I/We lodge my/our claim for the above balances with accrued interest of the above named deceased in terms of (*Select which is applicable*)

Will of the late Mr./Mrs _____ dated _____ and a probate granted by the Court of _____ at _____ dated _____ (Copies enclosed).

Succession Certificate dated _____ granted by the Court of _____ at _____ (Copies enclosed).

Letter of Administration No. _____ dated _____ issued by _____ at _____ (Copies enclosed).

Deceased has made a Will dated _____ bequeathing the said property including the money in the account(s) in favour of the claimants and has appointed the claimant as an executor. However, neither I/we nor any other person has applied for a probate, letter of administration or a succession certificate in regard to the assets left by the deceased.

The deceased died intestate. I/We lodge our claim without a legal representation for payment as per the Bank's rules and discretion.

4. I/We furnish below the required information about the deceased and the legal heirs in this regard: -

(a) Date and place of death

(b) Details of Death Certificate no, _____ dated _____ Authority _____ (copies enclosed- Original to be produced for verification).

(c) Age _____

(d) Marital Status- Married/Unmarried/Widow(er)

(e) Permanent Address

(f) Religion _____

(g) Which law of succession is applicable _____ (Hindu, Mohammedan etc.)

(h) Names(s), Relation(s) and age(s) of the legal heirs (including father, mother, sons, daughter, wife, sister, brother etc. as applicable) of the deceased:

S. No.	Name	Age	Relation	Address

(i) Name(s) of the Minor(s) and Natural Guardian(s)/Legal Guardian(s) of minors amongst claimants.

S. No.	Name of minor claimant(s)	Date of Birth	Name of Guardian	Relationship with minor

5. Mr./Mrs. _____ i.e. the person furnishing the affidavit (annexure 4.1 or 4.2) knows our family for the last _____ years and is unconnected with our family.

6. I/We declare that the facts stated above are true correct to the best of my/our knowledge and belief.

I/We request you to settle the claim: -

Basis the probated Will/succession certificate or the letter of administration provided.

OR

without insisting on a probated Will/succession certificate or the letter of administration. I/We the legal heirs as above agree to execute an indemnity bond, letter of disclaimer and any furnish any other documents as required by the bank.

Please settle the balance in the account(s)/deposit(s) (including upto date applicable interest) as per this application in favour of the claimant(s) as detailed below.

S. No.	Claimant name	Bank account number/Bankers cheque reference number/Demand draft/Payorder reference number	IFSC Code	Branch details

7. I/We submit photocopy of the following documents together with original. Please return the original Death/Legal Heir/Succession/Letter of Administration/Probated Will to me/us in due course. (* Below documents are mandatory for processing claim.)

Tick applicable documents	Documents
	Death Certificate
	Letter of disclaimer
	Affidavit and Letter of indemnity from all legal heirs
	Bank details & identity proof of claimants
	Affidavit from third parties
	Legal heir certificate/Letter of Administration
	Succession certificate
	Probated Will

I/We note to give any other documents required by you such as stamped receipt for the amount to be paid, etc., as and when required by the ICICI Bank.

Yours faithfully

Name(s) and Signature(s) of all the claimant(s).

Place

Date

Note: ICICI Bank is not responsible for any delay in disposal of the claim due to lack of full particulars furnished in this application and may insist on calling for legal representation in case there are disputes among legal heirs and if all of them do not join in indemnifying ICICI Bank (or give letter of disclaimer) or where ICICI Bank has reasonable doubt on the genuineness of the claimant(s) being the only heir(s) of the deceased customer.

OFFICE USE

Recommendation by BM/DBM:

I have verified the claim request received from the legal heir(s) of Late Mr./Mrs/Master/Miss _____ and have made necessary enquiries about the claim and is satisfied that the claim can be settled. All necessary documents have been obtained. The claim may be paid to the claimant(s).

Any other remarks:

**Place
Date**

**Signature
Name
Designation**

Customer's Acknowledgement slip (To be filled in by the Bank Staff)

Date:

Received from _____ Account
number(s) _____, a request for deceased claim settlement.
ICICI Bank, _____ Branch.

Emp name and ID _____ and _____.

Signature of Branch official with Bank Seal _____