

ANNEXURE 6

AFFIDAVIT AND INDEMNITY FORMAT

(To be stamped as per Stamp Act applicable to the State)

AFFIDAVIT AND LETTER OF INDEMNITY WITH RESPECT TO PAYMENT OF BALANCE IN THE NAME OF THE DECEASED ACCOUNT WITHOUT PRODUCTION OF LEGAL REPRESENTATION

To

ICICI Bank Limited

(1) State I/We (1) _____ son of/daughter of _____ (2) _____
here the son of/daughter of _____ (3) _____ son of/daughter of
names of _____ the legal heirs (above mentioned) of the late Mr./Mrs/Master/
the all heirs _____
of the Miss. _____ (*name of the deceased customer*) do hereby solemnly affirm on
deceased oath and say as follows:

(including those who signed Letter of Disclaimer)

1. That Mr./Mrs./Master/Miss _____ (name of the deceased) hereinafter, referred to as "the deceased" died intestate on _____ at _____.

2. I/We are the only legal heirs of the deceased Mr./Mrs./Master/Miss _____ and are entitled to succeed to the estate of the deceased on an intestate succession as per the applicable law under which we are governed.

3. That I/We are making this solemn declaration sincerely and conscientiously with full knowledge that it is on the strength of this declaration that ICICI Bank Limited's branch at _____ (" ICICI Bank") has agreed at my/our request, to make payment of the amounts of the deposits */to deliver the assets to the below mentioned person(s) without insisting on production by me/us of a grant of legal representation to the estate of the deceased from a competent court.

IN CONSIDERATION OF you paying or agreeing to pay to me/us _____ the sum of Rupees _____ standing at the credit of _____ (*type of account/deposit*) account No. _____ with your Bank in the name of late Mr./Mrs/Master/Miss _____, since

(2) Insert here names of all the

heirs of the deceased, without production of Letters of Administration or a Succession Certificate/probated Will to his/her estate,
 whom the payment will be made.
 I/We the below mentioned legal heirs

(3) State here the names of the all heirs of the deceased (including those who signed Letter of Disclaimer)

<u>S No.</u>	<u>Name(s) of the legal heirs</u>	<u>Age (years)</u>	<u>Relationship to the deceased</u>	<u>Address</u>

do hereby for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally UNDERTAKE AND AGREE to indemnify you and your successors and assigns 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 your having agreed to pay/or paying to me/us the said sum as aforesaid.

Sworn*/solemnly affirmed, signed and delivered

by the above named at this day of _____ at _____

- _____
1. _____ 2. _____ 3. _____
4. _____ 5. _____

(Heirs/claimants of the deceased) _____

In witness whereof, we have hereunto set our hands at _____ in the presence of _____ on this day of _____ at Place _____

Names and addresses of witnesses:

1. _____ 1. _____

2.

2.

Date:

(Signature of witnesses)

Signed before me this _____ day of _____ 20____

***Magistrate/Notary**

* (delete whichever is inapplicable)