

Annexure 2.1

APPLICATION CUM DECLARATION FORM FOR CLAIMS UPTO ₹ 50,000/-

(To be used for settlement of deceased claim in cases where the deceased has died intestate (without a Will/succession certificate/letter of administration), 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")

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 the below mentioned legal heirs/claimants regret to inform you about the demise of Mr./Mrs/Master/Miss _____ on _____.

2. He/ She was maintaining the following account(s)/deposit(s) with ICICI Bank Limited ("ICICI Bank").

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 hereby submit my/our claim for the above balances with accrued interest of the above named deceased.

The deceased died intestate. I/We submit our claim without a legal representation for payment as per the ICICI Bank's rules and discretion. **(Note: to be selected if the deceased died intestate.)**

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) Death Certificate no. _____ dated _____ issued by _____
(copies enclosed- Original to be produced for verification).

(c) Age of the deceased at the time of death - _____

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

(e) Permanent Address _____

(f) Religion _____

(g) Which law of succession is applicable to the deceased - _____
(Hindu, Mohammedan etc.)

(h) Names(s), Relation(s) and age(s) of the claimants/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 out of the claimants/legal heirs mentioned above.

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

5. I/We hereby declare that I/we am/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 laws under which we are governed. I/We further declare that the facts stated herein are true correct.

6. I/We request you to settle the claim without insisting on a probated will/succession certificate or the letter of administration. I/We the legal heirs as above agree to execute any furnish any other documents as required by ICICI Bank.

7. (**to be ticked if applicable**): I/We, the above mentioned legal heirs/claimants have to advise that I/we have no interest in the above mentioned assets and such that I/we have no objection to your paying the balance amount lying in the above account(s) with you in the name of/in favour of the following legal heirs of the deceased. 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

OR¹

(***to be ticked if applicable***): 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	Percentage of settlement

8. In consideration of ICICI Bank paying or agreeing to settle the claim in favour of me/us as the legal heirs of Mr./Mrs./Sri./Smt. _____, since deceased, without production of letters of administration or a succession certificate/probated will to his/her estate, I/we the below mentioned legal heirs/claimants do hereby for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally undertake and agree to indemnify ICICI Bank and its successors and assigns against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred by ICICI Bank by reason or in consequence of ICICI Bank having agreed to pay/or paying to me/us the said sum as aforesaid. Further, I/we agree and undertake that that in the event of any claims against ICICI Bank by any other legal heirs/third party/claimants, the same shall be paid/reimbursed by me/us on intimation without any demur.

9. I/We submit photocopy of the following documents together with original. Please return the original Death Certificate to me/us in due course. (* Below documents are mandatory for processing claim.)

¹ Branch Note: Please delete non applicable portion under point 7. Second part is where the settlement is split between all the legal heirs as per the specific request.

Tick applicable documents	Documents
	Death Certificate
	Bank details & identity proof of claimants

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 legal heirs.

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

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/claimants 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)/claimants 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)/legal heir(s).

Any other remarks:

Place:
Date:

Signature:
Name:
Designation:

