

Application for Deceased Claim

Form No.352 D Revised
March,2015

(To be used when account has nomination or is a joint account with survivor clause)

From

To

The Branch Manager,
Bank of Baroda

_____Branch

Dear Sir,

Re: Deceased Account

Late Shri/Smt

Account No (s)

I/We advise, the demise of Shri/Smt. _____ on _____
_____ He/She holds the above account(s) at your branch. The account is in the
name(s) of :

A. In case of Nomination

I, son/daughter of Shri
..... residing at.....
..... am

- (i) the registered nominee in the above account (s)
- (ii) the person authorized to receive payment on behalf of Master/ Miss who is the nominee in the above account(s) and is a minor as on the date of the claim.

Please settle the balance in the account in the name of the nominee. I/We receive the payment as trustee(s) of the legal heirs of the deceased.

Place:

Yours faithfully,

Date :

{Claimant(s)}

Witness (*) 1) Magistrate or Judicial Official OR 2) An Officer of the Central or State Government OR 3) An officer of a bank OR 4) Two persons acceptable to the bank

<p>Witness-1</p> <p>Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>Signature:</p>	<p>Witness-2</p> <p>Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>Signature:</p>
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BANK OF BARODA

B. In the case of joint account

I/We request you to delete the name of deceased person and continue the account in my/our name(s) with same mode of operations.

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

Death Certificate issued by
Identity proof (required in nomination cases)

Consent of Legal Heirs of deceased

Place:
Date :

Yours faithfully,

{Claimant(s)}