

APPENDIX - X

FORM .NO. 33

BANK OF BARODA

(CLAIM TO THE ASSETS OF THE DECEASED)

To
The Branch Manager,
Bank of Baroda,

----- Branch,

Sir,

**Re : Claim for payment / delivery of the balance /assets to the estate of
late Shri / Smt / Kum**

.....

1. In the matter of the assets of
(Full name of the deceased depositor/locker holder)

2 (a) Full Residential address :

(b) Occupation ----- (c) Age -----

(d) Law by which the deceased was governed : Hindu Succession Act,1956 / Indian
Succession Act / Mohammedan Law / Others.

3.Date of Death Proof *

(* Proof i.e. Death Certificate / certified extract of death register or a certificate of
the village head man to be enclosed).

4. (a) Details of the amount and / Or securities claimed :

Sr. No	Nature of the Deposit/Securities	Account No. / Receipt No.	Amount/value of securities # Rupees / paise	Date of maturity	Remarks
1	Type of Deposit / Securities				
2					
3					

#Valuation Certificate issued by valuer to be enclosed.

(b) Against which the outstanding direct and indirect liabilities :

Sr.No.	Nature of liability	Account No.	Amount of liability	Remarks
1.				
2.				

Note : If any account and /or deposit is in the joint names, state the names of all joint holders and conditional clause if any , regarding payment.

5. (a) Name/s of Claimant/s:

Sr.No	Name/ s	Occupation and address	Age	Relationship with the deceased.
1.				
2.				
3.				

(b) Details of Survivors :

Sr.No	Name/ s	Occupation and address	Age	Relationship with the deceased.
1.				
2.				

In case of Joint Hindu family, names of brothers / sisters / should be given.

6. (a) Are the deposit receipts / pass book / relating to amounts / key of the locker, in possession of the claimant/s

If not, its whereabouts ?

(b) Details of Deposit Receipts / SB pass book / Keys etc. submitted.

7. (a) Has the deceased left any will ? : YES / NO
(please specify with brief facts)

(b) Has any probate / letter of administration or succession certificate to the estate of the deceased has been obtained (please specify with brief facts) : YES / NO

8. (a) Did the deceased belong to the Joint Hindu Family ? : YES / NO

(b) If so who are the adult members of the family ?

Sr.No	Name/ s	Occupation and address	Age	Relationship with the deceased.

(c) Is the property claimed self acquired ?

(b) Proof of claimant/s title (Furnish documents in original for reference and return)

9. Are the claimant / s prepared to indemnify the bank against any future adverse claims ?

If so furnish the name/s, address ,occupation and worth, of sureties who will join in the execution of Bond.

1. Name 2. Name

Address..... Address.....

.....
.....

Occupation Occupation.....

Estimated Worth Rs..... Estimated worth Rs.....

Annual Income :

Value of Immovable Property.

- a) where they are situated ?
- b) Whether property is in Own name / Joint names
- c) Whether the property is
 - Encumbered
 - Unencumbered
 - Partially encumbered.

Note:

(This need not be filled up if a probate and /or letter of Administration or Succession Certificate has been produced)

I/We hereby declare the necessary particulars concerning my/ our above claim against the Bank in respect of the estate of the above named deceased. I/We shall furnish any further information that the Bank may desire in this regard. I/We declare that the above mentioned particulars furnished by me /us are true to my /our knowledge and belief and agree that I/We shall be jointly and severally liable to you for any misrepresentation or suppression of material facts and indemnify you against any demand made as you by any other person claiming under on in the right of the above mentioned deceased for or in respect of money / shares claimed by me/us herein.

Place :

Date :

Signature of claimant/ s

- 1.
- 2.
- 3.

INSTRUCTIONS FOR FILLING -UP THE CLAIM FORM

- 1.All the columns should be filled in with specific answers.
- 2.The form should be signed by all the claimant/s /heir/s of the deceased.
- 3.If there are minor heir/s / claimant/s, they should be represented by their guardian.
- 4.A consent letter/s signed by other claimants and surety/ies letter/s certifying to the correctness of the particulars furnished by the claimant/s in the form should be sent along with the claim form.

**FOR OFFICE USE
FOR BRANCH MANAGER**

We have verified the particulars mentioned in claim form by the claimant/s Shri / Smt / Kum..... and recommend that the balance in the deceased account of Shri / Smt ----- may be paid against the stamped Indemnity Bond signed by and the surety/ ies viz.

- 1.
- 2.

Balance in account Rs.-----
+Interest Rs.-----
= Total Amount Rs.-----

Recommended by Authorized to pay By

Department in-charge Branch Manager

Date :

NB . If the payment of the balance falls within the discretionary powers of the branch, they should sign the authority portion.

FOR REGIONAL OFFICE USE

We hereby authorize you to pay the balance of Rs.-----plus interest Rs.----- of the deceased Shri / Smt ----- to Shri/Smt / Kum -----against our usual stamped indemnity bond signed by the claimant/s -----and others as recommended by the branch and TWO sureties.

(1)..... (2).....

Date :..... Regional Manager

APPENDIX - XI

SURETY LETTER

FROM:.....

To,
The Branch Manager,
Bank of Baroda,
..... Branch.

Dear Sir,

Re; Claim to the balance in the -----accounts standing in the name of late

I know late Shri/Smt and the members of his /her family well for the past ----- years. He / She passed away on He / She is survived by the under mentioned persons as his / her heirs.

Sr.No	Name/ s	Age	Relationship with the deceased.
1.			
2.			
3.			
4.			

I have gone through the claim form to which this letter is appended and I hereby certify that the particulars furnished by the claimant/s in the claim form are true and correct to the best of my knowledge and information.

Yours faithfully,

()

Place :

Date :

APPENDIX - XII

(CONSENT LETTER)
(TO BE SIGNED BY OTHER CLAIMANTS)

FROM:.....

To,
The Branch Manager,
Bank of Baroda,
----- branch,

Dear Sir,

Re; Claim to the balance in the -----accounts standing in the name of late

I am writing this consent letter to inform you that my -----
--- (nature of relationship) Shri / Smt..... Passed away on..... leaving behind him / her heirs the under mentioned persons.

Sr.No	Name/ s	Age	Relationship with the deceased.
1.			
2.			
3.			
4.			

The amounts claimed under the above deposit/s account forms are part of the assets of the deceased .I am also entitled to a share in his/ her assets .

I hereby declare that I have no objection to the entire balance in the accounts being paid to my
Shri/ Smt.....

I, therefore , accord my consent to the balance in the accounts being paid to him / her . I further state that the discharge given by the said Shri/ Smt..... In respect of the said accounts / Deposits shall be as effective as if the same is given to me and binding on me.

Place :

Yours faithfully,

Date :

()

APPENDIX VII

LETTER OF INDEMNITY

In respect of payment of balance in deposit accounts of deceased persons

(To be stamped as an agreement)

The Branch Manager
Bank of Baroda

Place : _____
Date : _____

WHEREAS Mr/Mrs/Miss _____ (name of the deceased person) of _____ (address of the deceased person) had at the time of his/ her death to his/her credit a sum of Rupees _____ (balance in the account as on the date of death) which including interest upto _____ (date of repayment) amounts to Rs. _____ (amount now being repaid) in _____ (nature of account) account/s with the Bank of Baroda, _____ branch, (hereinafter referred to as "the said Bank").

AND WHEREAS _____ (names of the persons claiming repayment) _____ of _____ (address) _____ (hereinafter referred to as "the said claimant/s") and _____ have represented to the said Bank that the said claimant/s is/are entitled to have the said sum paid to the said claimant/s and have accordingly requested the said Bank to pay the said sum to the said claimant/s.

AND WHEREAS the said claimant/s and Mr/Mrs/Miss _____ (names of the surety/ies) _____ of _____ (address of surety/ies) _____ have agreed to indemnify the said Bank in respect of such payment.

NOW IN CONSIDERATION of the premises we, _____ (name/s of claimant/s) _____ and _____ (name/s of surety/ies) _____ for ourselves and our respective heirs, executors and administrators jointly and severally agree and undertake that the said Bank, its successors and assigns and its Managers, Agents, Officers and Servants, and their respective estates and effects are and shall from time to time and at all times hereafter be kept safe and saved harmless and indemnified for and in respect of such payment and against all actions, losses, costs, charges, expenses and demands whatsoever in respect of the said payment.

Yours faithfully,

(To be signed by the claimant/s and surety/ies)
