

Deceased Claim Application - I

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



To, Branch Head Development Credit Bank Ltd. _____ Branch	From (name and address of Claimant(s))
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Dear Sir,**Re: Deceased Account of Late Mr/Ms.** _____**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 / wife of Mr. _____
_____ 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 this 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.

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 / mode of operation as :

Single/Self Either or Survivor Jointly Other (please specify) _____

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) _____

Place:

Yours truly,

Date:

Signature(s)**FOR OFFICE USE ONLY**

Documents Verified	Action Taken
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Date: _____
Signature(s) of Bank Officials _____**Deceased Claim - Acknowledgement to Claimant(s)**

Claimant's Name	Cust ID
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Received request, subject to verification, for Settlement of Deceased Claim with Nomination / Survivorship Clause.

Signature / Date Receipt Stamp**DEVELOPMENT CREDIT BANK LTD.**

24 Hour Customer Care Centre: 3281 1322 Website: www.dcbl.com Email: customercare@dcbl.com