

Deposit accounts & Gold Loan

Annexure – DA 1

Application for Deceased claim

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

To,

The Branch Manager,

DBS Bank India Limited

_____ Branch

Dear Sir/Madam,

Deceased Account: Late Mr./ Ms. _____

1. I, ___<name of nominee/survivor>_____, aged _____, residing at <address of the nominee>, being the <relationship with deceased>/survivor, advise the demise of Mr./Ms.

_____ on _____.

2. He/ She holds the following bank accounts ("Account(s)") with DBS Bank India Ltd.

Sr.No.	Account Number	Type of Account (CA/SA/TD/Gold Loan)

(Use separate claim form for Safe Deposit Locker)

3. Applicable where nomination is available (*Select any one*)

I _____, am the registered nominee in the above Account(s).

OR

I _____, am the under-guardian for the minor and 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.

As nominee/guardian of the nominee, I request the Bank to close the said Account(s) post deducting all the dues payable by the deceased Account holder under any credit facility availed by him/her from the Bank, whether it is in default or not, and thereafter pay me the credit balance (if

any) available in the said Account(s) as per payment instructions shared below and/or return the gold jewellery to me.

3. Applicable in the case of joint-account (select one)

I/We request the Bank to close the said Account(s) post deducting all the dues payable by the deceased Account holder under any credit facility availed by him/her from the Bank, whether it is in default or not, and thereafter pay me/us the credit balance (if any) available in the said Account(s) as per payment instructions shared below.

OR

I/We request the Bank to delete the name of deceased person and continue the account in my name / in the name(s) of other survivors with mode of operations as _____

5. Instructions for payment of closure proceeds:

Issue pay order in my name

OR

Transfer the proceeds in the said Account(s) via NEFT/RTGS/bank transfer to account no. _____ held by me in _____ Branch of _____ Bank having IFSC number _____.

6. I/We have attached the certified photocopy of the following document(s) and original document will be made available for verification.

- a. Death Certificate issued by _____
- b. Identity proof _____
- c. Relationship proof document _____

6. I/We am/are aware that I/we would be receiving the payment from the Bank as a trustee of the legal heirs of the deceased depositor, i.e. such payment/delivery of goods to me/us shall not affect the right or claim which any person may have against myself/us, to whom the payment is made or goods delivered. I/We confirm that there is no order from any competent court restraining the Bank from making the payment from the Account(s) of the deceased or returning the deposited gold jewelry to me.

Yours faithfully,

Place:

Date:

(Nominee/Survivor's Signature)

Notes:

- Please strike off the not applicable cases/scenario
- In 'Nomination' case, relationship proof must be obtained if nominee is a relative of the deceased customer. In case nominee is not a relative, relationship proof need not be obtained.

Annexure – DA 2

Application for Deceased claim

(No Nomination cases up to INR 25 lakhs and joint accounts without survivorship clause)

To,
The Branch Manager
DBS Bank India Limited
_____ Branch

Deceased Account: Late Mr / Ms _____,

Dear Sir/Madam,

1. I/We advise the demise of Mr./Ms. _____ on _____.
2. He/ She holds the following bank accounts (“Account(s)”) with DBS Bank India Ltd. (“Bank”)

Sr.No.	Account Number	Type of Account (CA/SA/TD)	Account held singly or jointly

(use separate claim form for Safe Deposit Lockers)

3. I/We lodge my/our claim for the credit balances lying in the Account(s) of said deceased and/or the seeking return of gold jewelry deposited against gold loan by the said deceased who died intestate. I / we are the legal heirs of the above named deceased and lodge my/our claim for payment /delivery of gold jewelry as per the Bank’s rules and discretion. The relevant information about the deceased Account holder and the legal heirs are as under.
 - a. Names in full of the parents of the deceased:
Father: _____
Mother: _____
 - b. Religion of the deceased: _____
 - c. Details of living (i) Husband (ii) Wife (iii) Children (iv) Father (v) Mother (vi) Brothers (vii) Sisters (viii) Grand Children. If Hindu Joint Family, the name and address of the Karta and Co-parcenors with their respective ages.

Sr.No.	Name	Address	Occupation	Age	Relationship with Deceased

d. Incase of survivor being minor:

Name of the Children of the Depositor: _____

Guardian/s of the minor: _____

(i) Whether Natural Guardian : _____

(ii) Whether Guardian appointed by Indian Court* : _____

* attach a certified copy or duly attested copy of such order

(iii) In whose custody the Minor/s is/are : _____

4. Claimant/s Details:

Name	Age	Address	Relationship with Deceased	ID Proof Provided

5. I/We have attached the certified photocopy of the Death Certificate of the deceased and original document will be made available for verification.

6. I/we request the Bank to close the said Account(s) post deducting all the dues payable by the deceased Account holder under any credit facility availed by him/her from the Bank, whether it is in default or not, and thereafter pay me the credit balance (if any) available in the said Account(s) as per payment instructions shared below and/or return the gold jewellery to me/us.

7. I/We agree and undertake to pay such amounts as may be due and payable in the gold loan account of the said deceased.

8. I/We are attaching the Affidavit cum indemnity in support of this application to claim the closure proceeds. *[Applicable where claim amount is more than INR 5 lakhs]*

9. I/We request the Bank to pay the balance amount lying to the credit of the above named deceased to _____ on my/our behalf by way of :

Issuance of pay order

OR

Transfer the proceeds in the said Account(s) via NEFT/RTGS/bank transfer to account no. _____ held by _____ in _____ Branch of _____ Bank having IFSC number _____.

[Applicable in case of claims upto INR 5 lakhs]

10. I/We have attached the No-Objections letter provided by the other legal heirs for settling the claim as aforesaid in my/our name/s.

11. I have attached herewith the following documents in support of this application

Tick where applicable	Document Type
	Affidavit-cum-Indemnity (Applicable where claim amount is between INR 5 lakhs upto 25 lakhs)
	Legal Heirship Certificate and Surety bond from 2 individuals (Applicable where claim amount is between INR 15 lakhs upto 25 lakhs)
	No-Objection Letter from legal heirs who have relinquished their claim in favour of the claimants herein (where applicable)

12. I/We confirm that there is no order from any competent court restraining the Bank from making the payment from the Account(s) of the deceased to me/us or returning to me/us the gold jewelry deposited against gold loan. I/we agree to make good all losses or damages that the Bank may suffer on account of acceding to my/our request to settle the claims without insisting on succession or letter of administration.

13. I/We hereby solemnly affirm that the above statements are true and correct to the best of my/our knowledge and belief.

Place: _____

Date: _____

Yours faithfully,

(Name and Signature of all Claimants and the Survivor)

Note:

- In 'No nomination' cases where total claim amount is upto INR 5 lakhs - relationship proof (son/daughter/parent/spouse) document must be obtained.
- In case of Joint-account without survivorship clause, this DA2 form must be signed by the survivor along with the legal heirs.

Annexure – DA 3

(Affidavit-Cum- Indemnity for settlement of Deceased Claim between INR 5 to 25 lakhs Without Production of Succession Documents)

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

To

The Branch Manager

DBS Bank India Limited

_____ Branch

1. I/We, whose details are provided in the table below (hereinafter referred to as "Legal Heirs"), wish to inform that Mr./Ms. _____ ("Deceased") died intestate at _____ on ___ day of ___ 20___ and the Notarized copy of the Death Certificate of the said Deceased is attached herewith.

Sr.No.	Name of legal heir	Age	Relationship with deceased	Address

2. I/We, the Legal Heir(s), do solemnly declare and state as under:
- a. That said deceased was maintaining Savings / Current /Term Deposit / Gold Loan Account Nos. _____ (the said "Account(s)") with DBS Bank India Ltd. (the Bank).
 - b. I/We hereby request and authorize the Bank to deduct all the dues and charges payable by the said Deceased under credit facilities or otherwise to the Bank, regardless of whether it is in default or not, from the credit balance available in the abovementioned Accounts and pay the balance amount to us.
 - c. Where the said Deceased maintained gold loan account, I/We agree to make all the payments to close the said gold loan account before seeking return of gold jewels.
 - d. I/We state and confirm that the above legal heir/s are the only legal heir/s of the said Deceased.
 - e. I/We hereby confirm having no knowledge of the deceased having made any Will or there being any other claimant or dispute in relation to the said Accounts.
 - f. I/We have attached the copy of the legal heirship certificate along with this affidavit confirming that the above mentioned legal heir/s are the only legal heir/s of the said Deceased. (Applicable only where claim amount is more than INR 15 lakhs)
 - g. I/ We understand that payment of proceeds of the said Account(s) to me/us or the return of gold jewels to me/us would constitute discharge of the Bank's liability and that I/ We would be

receiving the proceeds of the subject account(s) from the Bank as trustee(s) of the legal heirs of the said Deceased, if there be any legal heirs other than me/us.

h. I/we state that I/we have submitted this application to claim the funds lying in the said Accounts of the Deceased as also the return of gold jewels if any deposited. I request the Bank to settle the claim in our favour by remitting the funds to the following bank account of one of the Legal Heirs:

Name:

Account No.:

Bank name and branch:

IFSC Code:

- i. In consideration of the Bank agreeing to return the gold jewels and/or repay the balance amount in the said Account(s) as aforesaid without insisting upon the production of succession certificate or other legal representations from any competent court / authority, I/We agree to indemnify and shall keep indemnified the Bank, its directors and officers against all claims in respect of the said Account(s) and against all charges, costs, actions, expenses, claims or demands which the Bank, its Directors and Officers may now or hereafter be liable to pay, incur or sustain in connection with the said Account(s).
- j. I/We confirm that I/we have not suppressed any material fact and I/We will be liable to return the amounts received in case any of the statements is found to be false or incorrect.

IN WITNESS WHEREOF SIGNED AND DELIVERED

By the above named legal heirs on this _____ Day of _____ two thousand _____

1. _____ 2. _____ 3. _____ 4. _____

(Legal Heirs of the Deceased)

Before Me

NOTARY

Enclosures:

1. Notarized Death Certificate
2. Legal heirship certificate where applicable

Annexure DA 4

INDEMNITY BOND WITH SURETY

(To be stamped for appropriate value in the relevant State for indemnity and guarantee)

(To be obtained with Affidavit where claim amount is more than INR 15 lakhs)

THIS INDENTURE is made at.....this.....day of.....200..... by:

- A. Mr./Ms._____ aged ____, residing at _____ holding PAN No._____ hereinafter called 'the Principal Party' of the First Part and
- B. Mr./Ms.....aged _____, residing at _____ holding PAN No._____ of Mr./Ms._____ hereinafter called 'Surety No.1' of the Second Part, AND
- C. Mr./Ms.....aged _____, residing at _____ holding PAN No._____ of Mr./Ms._____ hereinafter called 'Surety No.2' of the Third Part

IN FAVOUR OF

- D. DBS Bank India Limited, having its office at _____, herein called 'the Bank', of the Fourth Part

WHEREAS

- 1. Mr./Ms._____ resident of _____ ("said Deceased"), at the time of her/his death maintained following bank account(s) with Bank:
 - i. Account No.
 - ii. Account No.
 - iii. Account No.
 - iv. Account No.

collectively referred to as "the Accounts"

- 2. The said Principal Party(ies) claim(s) to be the sole legal heir/surviving legal heirs of the said Deceased and entitled to the funds lying against the above mentioned Accounts of the Deceased and/or the gold jewels deposited against gold loan availed by the deceased. The said Principal Party(ies) have submitted their claim(s) for the payment of the balance(s) standing to the credit of the said Deceased's Accounts with the Bank and/or return of gold jewels to them.

NOW THIS INDENTURE WITNESSETH that in consideration of the Bank acceding to my/our request and returning the gold jewels to me/us and/or making payment of amounts from Accounts above mentioned to the Principal Party (the receipt whereof the said principal party hereby acknowledges), the said Surety No. 1 and Surety No.2 both bind themselves severally and jointly to pay the aforesaid amounts with interest, loss, damages and cost of all kinds whatsoever to the said Bank, in case of any claim arising out of or related to the aforesaid money(s) by anybody else. Further, in consideration of the aforesaid payments/return of jewels to the said Principal Party by the Bank, the Surety No.1 and Surety No.2 both undertake for themselves their heirs, executors and administrators to hold the Bank, its directors, employees and agents etc. harmless and indemnified in respect of all claims to the aforesaid money(s).

The Surety No.1 and Surety No.2 undertake and agree to provide/execute such other documents that may be required by the Bank from time to time to conduct appropriate credit assessment.

IN WITNESS whereof the Principal Party, Surety No.1, and Surety No.2 have affixed their signatures.

Party	Signature
Principal Party	
Surety 1	
Surety 2	
Bank	

Before me,

NOTARY

Notes:

1. Surety must not be related / directly involved in assets of the Deceased.
2. Each of the Surety's net-worth must be at least double the Claim Amount

Annexure DA 6

Application for Deceased claim (where succession certificate/probate/letter of administration is available)

To,

The Branch Manager,
DBS Bank India Limited

_____ Branch

Dear Sir/Madam,

Deceased Account: Late Mr./ Ms. _____

1. I, ___ <name of claimant> _____, aged _____, residing at <address of the claimant>, being the <relationship with deceased>, advise the demise of Mr./Ms. _____ on _____.
2. He/ She holds the following accounts account(s) with DBS Bank India Ltd.

Account number	Type of Account (CA/SA/TD)

3. I/We have attached the certified photocopy of the following document(s) and original document will be made available for verification.
 - a. Death Certificate issued by _____
 - b. My Identity proof _____
4. I/ We hereby claim the proceeds of the said Account(s) based on the following, certified true copies of which is/ are enclosed.

Sr No.	Document Type	Date	Issuing authority	Issued in favour of
	Probate			
	Succession Certificate			
	Letter of Administration			

5. I/We request you close the said Account(s) post deducting all the dues payable by the deceased Account holder under any credit facility availed by him/her from the Bank, whether it is in default or not, and thereafter pay me/us the credit balance (if any) available in the said Account(s) as per payment instructions shared below.
6. Instructions for payment of closure proceeds:
 Issue pay order in my name
OR
 Transfer the proceeds in the said Account(s) via NEFT/RTGS/bank transfer to account no. _____ held by me in _____ Branch of _____ Bank having IFSC number _____.

Yours faithfully,

Place:

Date:

(Claimant's Signature)

Safe Deposit Lockers

Annexure – LA 1

(Only for Safe Deposit Lockers)

(To be obtained in case Nomination is available in locker held singly)

To,

The Branch Manager,

DBS Bank India Limited

_____ Branch

Dear Sir/Madam,

Deceased Account: Late Mr./ Ms. _____

1. I, ___<name of nominee>_____, aged _____, residing at <address of the nominee>, being the <relationship with deceased>, advise the demise of Mr./Ms.

_____ on _____.

2. He/ She holds the following Safe Deposit Locker ("Locker(s)") with DBS Bank India Ltd. ("Bank")

Sr.No.	Locker Number

3. *Select any one*

I _____, am the registered nominee in the above Locker(s).

OR

I _____, am the under-guardian for the minor and authorized to receive the contents of the locker on behalf of Master / Miss _____ who is the nominee in the above Locker(s) and is a minor as on the date of this claim.

3. As nominee/guardian of the nominee, I wish to access the Locker(s). I request the Bank to:

Close the said Locker(s) and release the contents of the Locker(s) to me after recovering any dues payable by the deceased Locker holder.

OR

Allow me to continue the Locker after signing new Locker agreement with the Bank

4. I have attached the certified photocopy of the following document(s) and original document will be made available for verification.

d. Death Certificate issued by _____

- e. My Identity proof _____
- f. Relationship proof document _____

6. I/We am/are aware that I/we would be receiving the Locker contents from the Bank as a trustee of the legal heirs of the deceased Locker holder, i.e. such release of Locker contents/delivery of goods to me shall not affect the right or claim which any person may have against myself, to whom the goods/Locker contents are being returned. I confirm that there is no order from any competent court restraining the Bank from releasing the contents of the Locker(s) held by the deceased to me.

Yours faithfully,

Place:

Date:

(Nominee's Signature)

Notes:

- Please strike off the not applicable cases/scenario
- In 'Nomination' case, relationship proof must be obtained if nominee is a relative of the deceased customer. In case nominee is not a relative, relationship proof need not be obtained.

Annexure – LA 2

(Only for Safe Deposit Lockers)

(To be obtained in case of Nomination in Jointly held Locker with Joint Operating Mandate)

(To be submitted by surviving joint holder(s) AND the Nominee)

To,

The Branch Manager,

DBS Bank India Limited

_____ Branch

Dear Sir/Madam,

Deceased Account: Late Mr./ Ms. _____

1. We the nominee or survivors whose details are provided below advise the demise of Mr./Ms. _____ on _____ (“said deceased”).

Name	Nominee/Joint Holder	Age	Address	Relationship with Deceased

2. We state that the said deceased holds the following Safe Deposit Locker (“Locker(s)”) with DBS Bank India Ltd. (“Bank”) which are held jointly and where _____ <name of the nominee> _____ has been appointed as a nominee to receive the locker contents on death of the said deceased.

Sr.No.	Locker Number

3. *Select any one*

I _____, am the registered nominee in the above Locker(s).

OR

I _____, am the under-guardian for the minor and authorized to receive the contents of the locker on behalf of Master / Miss _____ who is the nominee in the above Locker(s) and is a minor as on the date of this claim.

4. I, ____ <name of the nominee> _____, along with the survivor/s in the Locker(s), request the Bank to allow us to access the Locker(s). We request the Bank to:

Close the said Locker(s) and release the contents of the Locker(s) to us after recovering all the dues payable by the deceased Locker holder.

OR

Allow us to continue the Locker after signing new Locker agreement with the Bank.

4. We have attached the certified photocopy of the following document(s) and original document will be made available for verification.

g. Death Certificate issued by _____

h. Our Identity proof _____

i. Relationship proof document _____

5. We are aware that we would be receiving the Locker contents from the Bank as a trustee of the legal heirs of the deceased Locker holder, i.e. such release of Locker contents/delivery of goods to us shall not affect the right or claim which any person may have against us, to whom the goods/Locker contents are being returned. We confirm that there is no order from any competent court restraining the Bank from releasing the contents of the Locker(s) held by the deceased to us.

Yours faithfully,

Place:

Date:

(Signatures of the Nominee and Survivor(s))

Notes:

- Please strike off the not applicable cases/scenario
- In 'Nomination' case, relationship proof must be obtained if nominee is a relative of the deceased customer. In case nominee is not a relative, relationship proof need not be obtained.
- Where there are more than 1 nominees, all nominees along with survivor must sign this document.

Annexure – LA 3

(Only for Safe Deposit Lockers)

(To be obtained in case of Jointly held Locker with Survivorship Clause)

(To be submitted by surviving joint holder(s) AND the Nominee)

To,

The Branch Manager,

DBS Bank India Limited

_____ Branch

Dear Sir/Madam,

Deceased Account: Late Mr./ Ms. _____

1. I/We the surviving joint holder whose details are provided below advise the demise of Mr./Ms. _____ on _____ (“said deceased”).

Name	Joint Holder	Age	Address	Relationship with Deceased

2. We state that the said deceased holds the following Safe Deposit Locker (“Locker(s)”) with DBS Bank India Ltd. (“Bank”) which are held jointly with us and the operating mandate is “Either or Survivor”.

Sr.No.	Locker Number

3. I/We, being the survivor/s in the said jointly held Locker(s), request the Bank to allow me/us to access the Locker(s). I/We request the Bank to:

Close the said Locker(s) and release the contents of the Locker(s) to me/us after deducting all the dues payable by the deceased Locker holder.

OR

Allow me/us to continue the Locker after signing new Locker agreement with the Bank.

4. I/We have attached the certified photocopy of the following document(s) and original document will be made available for verification.

j. Death Certificate issued by _____

k. Our Identity proof _____

5. I/We are aware that I/We would be receiving the Locker contents from the Bank as a trustee of the legal heirs of the deceased Locker holder, i.e. such release of Locker contents/delivery of goods to me/us shall not affect the right or claim which any person may have against us, to whom the goods/Locker contents are being returned. I/We confirm that there is no order from any competent court restraining the Bank from releasing the contents of the Locker(s) held by the deceased to me/us.

Yours faithfully,

Place:

Date:

(Signature of Surviving joint holders)

Annexure – LA 4

(Only for Safe Deposit Lockers)

(To be obtained in case of Lockers where there is No Nomination)

(To be submitted by Legal Heirs and the surviving joint holder(s))

To,
The Branch Manager
DBS Bank India Limited
_____ Branch

Deceased Account: Late Mr / Ms _____,

Dear Sir/Madam,

1. I/We advise the demise of Mr./Ms. _____ on _____.
2. He/ She holds the following Safe Deposit Locker (“Locker(s)”) with DBS Bank India Ltd. (“Bank”)

Sr.No.	Locker Number	Type of Account	Account held singly or jointly

3. I/We lodge my/our claim for accessing the aforesaid Locker(s) and to return the contents of the Locker(s) of the said deceased who died intestate. I / we are the legal heirs of the above named deceased and lodge my/our claim for delivery of Locker contents as per the Bank’s rules and discretion. The relevant information about the deceased Locker holder and the legal heirs are as under.

a. Names in full of the parents of the deceased:

Father: _____

Mother: _____

b. Religion of the deceased: _____

c. Details of living (i) Husband (ii) Wife (iii) Children (iv) Father (v) Mother (vi) Brothers (vii) Sisters (viii) Grand Children. If Hindu Joint Family, the name and address of the Karta and Co-parcenors with their respective ages.

Sr.No.	Name	Address	Occupation	Age	Relationship with Deceased

5. Incase of survivor being minor:

Name of the Children of the Depositor: _____

Guardian/s of the minor: _____

(i) Whether Natural Guardian : _____

(ii) Whether Guardian appointed by Indian Court* : _____

* attach a certified copy or duly attested copy of such order

(iii) In whose custody the Minor/s is/are : _____

6. Claimant/s Details

Name	Age	Address	Relationship with Deceased	ID Proof Provided

5. I/We have attached the certified photocopy of the Death Certificate of the deceased and original document will be made available for verification.
6. I/we request the Bank to close the said Locker/s post deducting and/or recovering all the dues payable by the deceased Locker holder to the Bank, and release the locker contents to me/us. I/We agree and undertake to pay such amounts as may be due and payable in the Locker account of the said deceased.
7. I/We are attaching the Affidavit cum indemnity in support of this application to claim the Locker contents.
8. I/We have attached the No-Objections letter provided by the other legal heirs for settling the claim as aforesaid in my/our name/s and the survivors.
11. I have attached herewith the following documents in support of this application

Document Type
Affidavit-cum-Indemnity signed by all Claimants.
Legal Heirship Certificate
No-Objection Letter from legal heirs who have relinquished their claim in favour of the claimants herein (<i>to be provided where applicable</i>)

9. I/We confirm that there is no order from any competent court restraining the Bank from allowing me or us to access the Locker or delivering the Locker contents to me or us. I/we agree to make good all losses or damages that the Bank may suffer on account of acceding to my/our request to settle the claims without insisting on succession or letter of administration.
10. I/We hereby solemnly affirm that the above statements are true and correct to the best of my/our knowledge and belief.

Place: _____

Date: _____

Yours faithfully,

(Name and Signature of all Claimants and the Survivor)

Note:

- In 'No nomination' cases where total claim amount is upto INR 5 lakhs - relationship proof (son/daughter/parent/spouse) document must be obtained.
- In case of Joint-account without survivorship clause, this DA2 form must be signed by the survivor along with the legal heirs.

Annexure –LA 6: Affidavit cum Indemnity Letter for Safe deposit Lockers

(To be obtained in case of i) Lockers operated sing without Nomination) In respect of payment of balance in deposit accounts / contents of safe deposit locker/ safe custody articles of deceased person;

(To be stamped with the duty payable (Rs 600 or as applicable basis the Jurisdiction for affidavit & Indemnity bond)

I/We Mr/Ms/Miss

(name/names of the claimants),

(s/o, w/o, d/o),

aged,

address, do hereby solemnly affirm and state as follows.

1. I/We am/are the legal heirs of Mr/Ms/Miss (name of deceased account holder) and the deceased is my/our (father/mother/wife/husband/son/daughter etc.)

2. I/We further state that I/We the following legal heirs are the only legal heirs entitled to claim the balance deposit/amount /jewels/ ornaments and other valuables the contents held in the locker/safe custody:-

No Name Age Relationship to the deceased

- 1
- 2
- 3
- 4

3. I/We further state that the deceased was holding an account (hereinafter referred to as “the account”) (specify the account details) _____ in _____ branch of _____ bank (herein after referred to as “the Bank”). At the time of the death of the deceased the account was having a credit of Rs _____ (balance amount in the account) which includes interest upto _____ (date of payment) amount to Rs. _____ (amount being now paid).

4. I/We affirm that I/We am/are the sole legal heirs of the deceased who are entitled to receive the amount standing in the credit of the account belonging to the deceased.

5. I/We have requested the bank to make the payment of the amount standing in the credit of the account belonging to the deceased together with interest thereon as applicable to 22 shri/smt _____ being one of the legal heirs for and on behalf of all the legal heirs. OR I/We have requested the bank to hand-over contents of the safe deposit locker/items held in safe custody to Shri/Smt. _____ being one of the legal heirs for and on behalf of all the legal heirs.

6. I/We are aware that the Bank has agreed to settle our claims relying on this affidavit and I/We agree to indemnify the bank in respect of such payment or delivery of the contents of items in safe deposit locker

or held in safe custody against any claim made by any person for the amount standing to the credit of the account of the deceased.

7. I/We for ourselves and my/our respective heirs, executors and administrators jointly and severally agree, affirm and undertake that the 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, cost, charges, expenses and demands whatsoever in respect of the said payment or delivery of the contents of items in safe deposit locker or held in safe custody.

All the averments made herein before are true and correct and I/We put my/our signature/mark on this _____ Day of _____ 200__ at _____ in the presence of _____.

Signatures(s) of deponents. (claimants)

Signature of Witness Affidavit to be attested by Notary Public.

Annexure –LA 7: Specimen No Objection Letter from Legal Heir to return the jewels/credit balance in Account of the deceased customer

I, _____, aged ___ residing at _____, state that I am the legal heir of late Mr. / Ms. _____ (name of the deceased holder) and declare as follows –

(i) That the above named deceased holder was holding the following bank accounts in his / her name:

Type of Account	Account Number
1)	
2)	
3)	

(ii) That the deceased had died intestate on DD / MM / YYYY .and without registering any nominee.

(iii) That the following Claimant(s) has/have applied for claiming the credit proceeds in the Account of the deceased and/or release of gold jewels deposited with the Bank.

Name of All Claimant(s)	Address and contact details	Age	Relationship with the deceased
1)			
2)			
3)			

(iv) That I am the legal heir of the deceased holder, apart from the Claimant(s) who has/ have applied for claiming the closure proceeds and/or return of gold jewels details of which are as follows:

Name of the Legal Heir(s)	Address and contact details	Age	Relationship with the deceased
1)			
2)			
3)			
4)			

- (v) I hereby declare that, I do not desire to make any claim in respect of the credit balance in the Account and/or gold jewels held by the Bank against the name of the deceased and I hereby wilfully relinquish & renounce all my rights in respect of the aforesaid property and shall have no legal claim upon said property in future.
- (vi) Accordingly, I declare that I have NO OBJECTION WHATSOEVER in DBS Bank India Limited making payment of the credit balance in the Account(s) of the said deceased and/or returning the gold jewels to the in favour of the Claimant(s) Mr. / Ms. _____.
- (vii) I hereby state that whatever is stated herein above are true to the best of my/our knowledge and nothing has been concealed therein.

Name and Signature of Legal Heir who are Non – Claimant(s):

1) _____

2) _____

3) _____