

Application for Deceased Claim

Annexure – 2

Form No.352 D

(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 Name: _____ Address: _____ _____ Signature: _____</p>	<p>Witness-2 Name: _____ Address: _____ _____ Signature: _____</p>
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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 survivor

Place:
Date:

Yours faithfully,

{Claimant(s)}