



## NAVSARJAN INDUSTRIAL CO. OPERATIVE BANK LTD.

Address: Plot No.5602, C/1 & C/14, G.I.D.C Estate, Ankleshwar, Gujarat 393001.

E-mail : [info@navsarjanbank.com](mailto:info@navsarjanbank.com)

website : [www.navsarjanbank.com](http://www.navsarjanbank.com)

### Settlement of Claims in respect of deceased Depositors

#### Check-list of Documents

Claims	Document obtained : Yes/ No
1. Accounts with Nomination clause:	
(i) Application for Deceased Claim from Nominee/Guardian of nominee (Annexure-3)	
(ii) Copy of Death Certificate (Verified with original)	
(iii) Identity proof	
2. Joint Accounts with Either of Survivor clause:	
(i) Application for Deceased Claim from Survivor(s) (Annexure – 3)	
(ii) Copy of Death Certificate (Verified with original)	

**Application for Deceased Claim**  
**( To be used when account has nomination or is a joint account with survivor clause)**

From

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To

The Branch Manager,

**Navsarjan Industrial Co Operative Bank Ltd.**

**Ankleshwar 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 \_\_\_\_\_ :

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**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.

**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) \_\_\_\_\_

Place:

Date :

Yours faithfully,