



## Unclaimed Deposits /Inoperative Accounts: Claim Form

The Branch Manager Bank: Branch:	UDRN No. (if available):	
	Address:	
	Pin:	
	Mob. No.	Email:
	Date:	

Dear Sir/Madam

I / We the undersigned Mr. /Mrs. / Ms. \_\_\_\_\_ in the capacity of self / Nominee / Legal Heir / Others (please specify) request for the activating / payment of the balance amount from my / our / deceased account held with your bank in the name of Mr. / Mrs./Ms. \_\_\_\_\_.

SR. No.	Nature of Account	Account No.	Amount
<b>Total Amount</b>			

**URN No. (if obtained from RBI UDGM portal or Bank's unclaimed deposit search portal):**

### **Details of Claimant(s)**

#### **Claimant 1**

Name of claimant	Date of Birth	Pan no.	Aadhar no.	Passport no.
Mobile no.	E-mail id	Voter card no.	others	Relationship with Depositor/Capacity of claim
<b>Communication Address with Pin code:</b>				

#### **Claimant 2**

Name of claimant	Date of Birth	Pan no.	Aadhar no.	Passport no.
Mobile no.	E-mail id	Voter card no.	others	Relationship with Depositor/Capacity of claim
<b>Communication Address with Pin code:</b>				

#### **Claimant 3**

Name of claimant	Date of Birth	Pan no.	Aadhar no.	Passport no.
Mobile no.	E-mail id	Voter card no.	others	Relationship with Depositor/Capacity of claim
<b>Communication Address with Pin code:</b>				

**KYC and other Document required:**

Claimant 1 - Pass Book / Account Statement / TD receipt / Official Valid Doc (OVD) / Death Certificate of deceased depositor (if claimant is Nominee / Legal heir(s))
Claimant 2 - Pass Book / Account Statement / TD receipt / Official Valid Doc (OVD) / Death Certificate of deceased depositor (if claimant is Nominee / Legal heir(s))
Claimant 3 - Pass Book / Account Statement / TD receipt / Official Valid Doc (OVD) / Death Certificate of deceased depositor (if claimant is Nominee / Legal heir(s))

**Death Certificate of Deceased Depositor (Ref No.):**

- a) I / We declare that the facts stated above are true and correct to the best of my/our knowledge and belief.
- b) I / We certify that the unclaimed account as per details displayed on the website of the bank/RBI UDGM belongs to me / us and as owners of the account I/We claim the amount from the account.
- c) I / We also understand that I/We will be required to procure all documents desired to establish my/our claim till settlement and agree to execute the required documents to settle the claim
- d) I / We understand that claim will be settled post due diligence and authentication of documents and in subject to bank's process & policy.

**Signature (s) of the claimant (s):p**

S.No.	Name of claimants	Signature of claimant

(if the space provided is insufficient ,please use additional sheet & two Bank acceptable witness is required in case of claimant(s) are illiterate.)

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**Customer Acknowledgment slip (to be filled in by Bank official)**

**Date:**

Received a request from Mr./Mrs./Ms. \_\_\_\_\_ for claiming Unclaimed Deposits/Inoperative Accounts.

Bank:

Branch:

**(Signature of Bank Official with Bank seal)**