

Deceased Depositors policy along with Nomination Rules

Nomination Rules:

The Banking Companies (Nomination) Rules, 1985 have been framed in terms of Sections 45 ZA to 45 ZF of the Banking Regulation Act, 1949.

Nomination facility is applicable only for individuals including a sole proprietary concern. There cannot be more than one nominee in respect of single / joint deposit account Banks may allow variation / cancellation of a subsisting nomination by all the surviving depositor(s) acting together

- Nomination on a Deposit account enables the bank to make payment of the amount standing to the credit of the deceased depositor to his/her nominee.
- In case of a joint deposit account, the nominee's right arises only after the death of all the depositors
- Where a nomination is made in the prescribed manner, on the death of sole/all the depositor(s), the nominee becomes entitled to receive the deposit to the exclusion of all other persons not withstanding anything contained in any other law for the time being in force or in any disposition, whether testamentary or otherwise in respect of such deposit.
- Payment by the bank in accordance with the provisions of the Act shall constitute a full discharge to the bank of its liability in respect of the deposit. Deceased Constituents
- Notice or knowledge of the death of a constituent precludes the bank from paying further cheques signed by the deceased person even though these may be dated / issued prior to death of the person, except when the bank itself becomes a holder-in-due course before the death of such person.
- In case of a joint account, the withdrawal may continue to be permitted to the survivor(s), if any, based on the mandate given at the time of opening a joint account. In due course, after completion of prescribed formalities, the name of the deceased person may be deleted or the account closed. .

Claim Situations

Various types of claim situations arising from the death of constituent(s) can be broadly grouped under the following four categories, viz.

- (a) Simple claims for deletion of name(s).
- (b) Nomination based claims.
- (c) Fast Track claims without nomination/Legal Representations.
- (d) Legal Representation based claims.

NOTE: The forms required for the above claim situations (fast track and others) are given in the Annexures sequentially.

Documents Common to All Claim Situations

In all claim situations as mentioned in 3.2.1(1), Death Certificate will be required as a basic document. Except for the first category, in all other situations, proof of identity of the Nominee or other claimant(s) will also be required. The following instructions should be followed in obtaining these documents:

- Death Certificate - Original Death Certificate issued by anyone of the following authorities alone is accepted:

- Registrar of Birth and Deaths
- Municipality or Corporation
- Panchayat Office

Death Certificate normally contains the place and date of the death of the deceased, his name and age. The original Death Certificate should be obtained, but when the claimant desires it to be returned, a photocopy of the same duly verified and attested by the concerned Personal Banker should be held on record. In case the customer has expired in a foreign country and the death certificate is issued abroad, the document issued by foreign country must be authenticated before they are recognized as valid in India. Hence the document must be authenticated with an apostille or the same may either be consularised by Indian Embassy.

- Proof of Identity of Nominee/Appointee of Minor/Other Claimants - Identification of the Nominee/Appointee of Minor Nominee/Other Claimants made by a Magistrate or a Judicial Officer or an Officer of the Central or State Government or an Officer of a bank or two persons acceptable to the bank must be obtained. The onus of establishing the identity of the Nominee/Appointee of Minor/Other Claimant(s) rests on the respective claimant(s). The acceptable documents that would serve as 'Identity documents' would be as per the Bank's acceptable list of identity documents

Format of Claim Application from to be obtained from Nominee

To
The Branch Manager
HDFC Bank Limited

1.	Name in full	
2.	Occupation	
3.	Address – Office	
	- Residence	
4.	Date of birth & Age of Nominee	
5.	Name of the nominees father/husband	
6.	Name of the deceased customer	
7.	Address of the customer	
8.	Age of the customer	
9.	Relationship, if any, of the Nominee with deceased constituent	
10.	Whether the nominee is in possession of cheque book/ATM card/Deposit Advice/Locker key/ Acknowledgement of nomination	
11.	If not, the reasons why the nominee is not in possession of the same	
12.	How did the nominee come to know of the nomination	
13.	Name of the bank and branch with whom the nominee is having an account	
14.	Particulars of deposits and lockers on which the Nominee claimant is registered	

I request the Branch Manager, HDFC Bank Limited, _____ branch, to pay the proceeds of the deposits/deliver the contents of the locker mentioned above to me as nominee of _____ (deceased constituent). I hereby declare that the above information furnished is all true, correct and full and that I have not omitted or suppressed any information called for under any of the above columns.

Date:

Place:

Signature of the Claimant (Nominee)

For Official Use of the Bank

Views/Recommendations of the Personal Banker:

(Furnish details of the deposits and enclose duly signed inventory of locker contents)

Date : Signature of the Personal Banker

Branch Manager Comments and Sanction:

After proper scrutiny of the claim application, personal interview with the claimant(Nominee) and verification of the death certificate and declaration, I sanction the above claim as recommended by the Personal Banker.

Signature of the Branch Manager

Date:

Format of Declaration from the Appointee of a Minor Nominee

To
The Branch Manager
HDFC Bank Limited
_____Branch

I, Shri/Smt./Kum _____ Nominee/appointed on behalf of the minor nominee hereby declare that I am the Nominee /appointed on behalf of the minor nominee of the deceased Shri/Smt. _____. I further declare that I am nominated to claim the deposit monies/articles held in Safe Custody/Safety Locker with _____ branch by Shri/Smt. deceased.

The deposit monies/articles held in Safe Custody/Safety Locker are held in account No(s). _____ Locker No. (s) _____ / Safe Custody Receipt No. _____ of Shri/Smt. _____deceased.

Shri/Smt. _____
Address _____ Signature _____
(Nominee/appointed on behalf of minor nominee) Date _____

Witness:*

1. Magistrate or Judicial Official
Name _____
Address _____

2. An officer of Central or State Govt.
Name _____
Address _____

Signature _____

Signature _____

3. An officer of a Bank
Name _____
Name of the Bank / Branch _____

Signature _____

OR

4. Two persons acceptable to the bank

Name _____
Address _____

Name _____
Address _____

Signature _____

Signature _____

(*Strike out whichever is not applicable)

Format of Claim Application from Legal Heirs

The Branch Manager,
HDFC Bank
_____ Branch

Dear Sir,

Re: Claim for Balances and Other Assets

I/We, the undersigned, hereby declare that I/We am/are the rightful legal heir(s) of the deceased _____, entitled to –

- a) receive the amount due on the deposit(s) detailed below,
- b) receive the contents of safe deposit locker(s)/articles in safe custody,
- c) shares/securities held in safe custody.

Accordingly, I/We hereby submit my/our claim and furnish the requisite particulars/documents/indemnities, etc. as prescribed by the bank.

1.	Full name of the deceased account holder	
2.	Details of Deposit Account(s)	Account Number, Balance
3.	Details of Safe Deposit Locker(s)	
4.	Details of Articles in Safe Custody	
5.	Details of Shares & Securities in Safe Custody	
6.	Details of Overdrafts, if any	
7.	Particulars of all the legal heir(s) (other details for each legal heir are given in enclosed Form 'D')	Name, Age, Relation to the Deceased
8.	Are there any other claimant(s)/heir(s) other than those mentioned above and joining in the Indemnity Bond who are also entitled to the share in the property left by the deceased as per the Personal Laws applicable to the deceased ?	
9.	Has the deceased left a Will? Who are the executors named in such will and whether probate is obtained? If not, why Probate has not been obtained?	
10.	If the deceased has not left a Will, has any legal representation been obtained to his estate, such as	

	Succession Certificate, Letters of Administration, Administrator General Certificate? If so, by whom?	
11.	If the deceased was married, did he/ she leave a widow/widower and/or a child or children of a predeceased child? Any minors? If so, is there a legal or natural guardian?	
12.	'If the deceased did not leave a Widow/Widower and a child or children or issue, did he/she leave him/her surviving any parent, "brother, sister or children of a predeceased brother, or sister ?	
13.	Is the property left by the deceased a part of the Joint Hindu Undivided Family property? If yes, who was and is the Karta of HUF ?	
14.	Are there any unsatisfied creditors? If so, state the names with amount claimed. If not, state accordingly.	
15.	What is the position regarding liability to and payment of Estate Duty, Income-tax, Sales tax and other Government dues?	
16.	Has the deceased-left any other assets? It so, who is/are the claimants having acquired title to such assets?	
17.	Was the deceased doing any business or was he in service? If the service, was he entitled to any provident Fund? If he was whom did he nominate to receive such Provident Fund? Have Provident Fund dues been paid? If so, to whom?	
18.	Was the life of the deceased insured? If so, to whom have the moneys been paid? Was there a nomination or assignment in respect of the assurance moneys? If so, to whom?	
19.	Proof of claimant(s)' right to claim the amount lying to the credit of the deceased and other assets with the bank, in the absence of the representations to the estate of the deceased	
20.	Name of sureties offered (Particulars of sureties and Declarations from them are furnished in the enclosed formats 'B' & 'C')	1. 2.
21.	Whether the claimant(s) has/have any liability (for advance raised from the Bank) or indirect liability (as guarantor for advance raised by others), If so, please state the amount and name of the borrowers. If not, state accordingly.	
22.	Whether the claimant(s) is/are in possession of Cheque Book(s) / ATM Card / Deposit Advice/Locker Key/Safe Custody Receipt, etc. Furnish details and enclose these	
23.	If not, the reasons why the claimant(s) is/are not in possession of these items	—
24.	How did the claimant(s) come to know the details of above referred accounts and other banking relationships of the deceased	

25	Any other facts which the applicant(s) want(s) to state in support of his/her/ their claim	
----	--	--

I/We hereby declare that the above statements and answers are true. I/We enclose an Indemnity Agreement signed by me/all of us along with our sureties. I/We request that bank to –

- pay the balances, and/or
- deliver the contents of safe deposit locker, and/or
- articles in safe custody, and/or
- shares & securities in safe custody,

to

- 1)
- 2)
- 3)

who is/are hereby irrevocably authorised by me/us to receive the above stated sums/other assets and give a valid discharge/receipt (binding me/all of us) to the bank. I/We also enclose a separate Letter of Disclaimer in Form 'A' prescribed by the bank.

I/We hereby authorise the bank to recover the outstanding, together with interest thereon, any overdraft/loan account standing in the name of the deceased. The bank may also recover the outstanding service charges, or any other dues payable by the deceased. I/We request the bank to kindly sanction my/our claim made above.

	Name of Claimant(s)	Signature of Claimant(s)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Thumb Impression of claimant (if illiterate)

Name of the Claimant(s) _____

Witness for Thumb Impression

Name _____

Address _____

Note:

In case the claimant is illiterate, he/she should affix his/her Thumb impression in the specimen for signature of the claimant, which should be witnessed by a person known to the Bank. (Following declaration to be given by the claimant who is illiterate or who does not understand English)

"I declare that above questions were explained to me and the answers thereto have been recorded at my instance as per my instructions and the same have been read over to and understood by me and that I have affixed my signature/thumb impression hereinabove after satisfying myself that they been correctly recorded".

Witness _____

Signature of the Claimant(s)

Format of Form 'A' – Letter of Disclaimer

The Branch Manager,
HDFC Bank
_____ Branch

Dear Sir,

Re: Refund/Delivery of Balance and Other Assets belonging to the Deceased

Our _____ Shri/Smt. _____ who holds the following accounts/assets with you died on _____.

Account No./Locker No./ Safe Custody No., etc.	Balance

I/We, the undersigned, along with Shri/Smt. _____ and Shri/Smt. _____ has/have applied to you for refund/delivery of the amount(s) outstanding in the above account(s) and delivery of the contents of locker(s), articles in safe custody, shares & securities in safe custody.

I/We hereby authorise Shri/Smt. _____ and Shri/Smt. _____ to receive the claim money/assets detailed above on our and their own behalf. I/We declare that the claimant Shri/Smt. _____ and Shri/Smt. _____ is/are the legal representative entitled to receive the amount of deposit/other assets in the name of the deceased and that I/We have no objection, if the Bank in pursuance of the request by me/us, refunds/delivers the amount/assets to him/her/them.

Thanking you,
Yours faithfully,

Name	Age	Signature	Address
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Format of Form 'D' – Information about Co-heirs of the Deceased

1.	Name of the Co-heir	
2.	Occupation	
3.	Office Address	
4.	Home Address	
5.	Income (per month)	Rs.
6.	Relation with Deceased	
7.	Banking Relations	Type of Account: Account No. : Since : Branch : Present Balance : Rs.

Date:

Signature:

Format of Letter of Indemnity

HDFC Bank Ltd.

IN CONSIDERATION OF your paying or agreeing to pay the balances, delivering or agreeing to deliver contents of safe deposit locker, articles kept in safe custody, shares & securities in safe custody held at the credit of and/or in the name of _____, the deceased as mentioned hereunder:

Account No.	Nature of Deposit	Balance/Principal Amount
Safe Deposit Locker No./Sealed Box in Safe Custody Account No.	Details of the Inventory of the Locker/Articles in Safe Custody	
	Description Weight Value	
Shares/ Securities Custody A/c. No.	Details of Shares & Securities	
	Date of Issue, Name of the Company, Distinctive Nos./ Folio No., No. of Shares/ Securities, Face Value, Total Face Value, Total Market Value as on _____	

without production of Letters of Administration or a Succession Certificate to his/her estate or a certificate from the Controller of Estate Duty to the effect that estate duty has been paid or will be paid or none is due.

I/We of the Ist Part –

- 1)
- 2)
- 3)
- 4)
- 5)

being the claimant(s) of the deceased, and

I/We of the IInd Part –

- 1)
- 2)

being the Witness(s) for the claimant(s) of the Ist Part, do hereby, for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally, UNDERTAKE AND AGREE to indemnify you and your successors and assigns against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred by you by reason or in consequence of your having agreed to pay/or paying the said sum as aforesaid, having delivered or agreed to deliver the above mentioned assets to the claimant(s) of Ist

Part.

Signed, sealed and delivered by the above named on this _____ day of _____ Two thousand _____ at _____.

Signed and Delivered

- 1.
- 2.
- 3.
- 4.
- 5.

(Heirs of the Deceased)

Signed and Delivered
by the above named

- 1.
- 2.

(Witness)

Format of Claim Application from Legal Claimant [Holder of Succession Certificate, or Letters of Administration, or Probate of Will]

The Branch Manager,
HDFC Bank
_____ Branch

Dear Sir,

Re: Claim for Balances and Other Assets

I hereby declare that I have received the legal representation from the appropriate authority entitling me to receive from your Bank the balance(s) in the account(s) and/or the contents of safe deposit locker(s) and/or articles in safe custody and/or shares & securities in safe custody held with the bank in the name of _____, the deceased.

Accordingly, I hereby submit my claim and furnish the requisite particulars/documents for your consideration and necessary action.

1.	Name in Full	
2.	Occupation	
3.	Address – Office	
	- Residence	
4.	Date of Birth and Age	
5.	Name of the Deceased	
6.	Relationship, if any with the deceased	
7.	Details of Deposit Account(s)	Account Number, Balance
8.	Details of Safe Deposit Locker(s)	
9.	Details of Articles in Safe Custody	
10.	Details of Shares & Securities in Safe Custody	
11.	Details of Legal Representations obtained. Original along with a copy enclosed	Type of Legal Representation, Issued by
		1.
		2.
		3.
12.	Whether the claimant is in possession of Cheque Book(s)/ATM Card/Deposit Advice/Locker Key/Safe Custody Receipt, etc. Furnish details and enclose these	
13.	If not, the reasons why the claimant is not in possession of these items	
14.	How did the claimant come to know the details of above referred accounts and other banking relationships of the deceased	

15.	Name of the bank and branch with whom the claimant is having an account	
-----	---	--

I hereby request the bank to arrange to pay the balance outstanding in the above referred account(s) of the deceased together with interest, if any, accrued thereon. I also request the bank to hand-over to me the contents of the safe deposit locker and/or articles in safe custody and/or shares & securities in safe custody lying with the bank in the name of the deceased. I also authorise the bank to recover the outstanding together with interest thereon in any overdraft/loan account standing in the name of the deceased. The bank may also recover the outstanding service charges, or any other dues payable by the deceased.

I hereby declare that the above information furnished is all true, correct and full and that I have not omitted or suppressed any information from the bank.

Signature of the Claimant

Thumb Impression of claimant (if illiterate)

Name of the Claimant _____

Witness for Thumb Impression

Name _____

Address _____

Format of Receipt

Rs. _____

Received from HDFC BANK LTD, _____ branch a sum of Rupees _____ only standing to the credit of the deceased depositor of the bank Mr. /Mrs. /Ms. _____ in deposit account(s) mentioned below together with interest thereon in full settlement of my claim as the nominee.

DEPOSIT ACCOUNTS

Sr. No.	Type of Deposit	Account No.	Amount Received on the Deposit including Interest (Rs.)

Place:

Date:

Name of the Nominee

Signature

Witness:

1.	Signature _____	2.	Signature _____
	Name _____		Name _____
	Occupation _____		Occupation _____
	Address _____ _____		Address _____ _____

Form of Inventory of Contents of Safe Deposit Locker Hired from Banking Company

The following inventory of contents of Safety Locker No. _____ located in the Safe Deposit Vault of HDFC BANK LTD. _____ branch at _____.

* Hired by Mr. /Ms. _____ deceased in his/her own name.

* Hired by Mr./Ms. 1. _____ Deceased

2. _____ Surviving Joint

3. _____ Hirers

was taken on this _____ day of _____.

Sr. No.	Description of Articles in Safety Locker	Other Identifying Particulars, if any

For the purpose of inventory, access to the locker was given to the Nominee/and the surviving hirers/approved claimant(s)

- who produced the key to the locker.
 - by breaking open the locker under his/her/their instructions.
- All the articles found inside the locker are listed in the above inventory.

The above inventory was taken in the presence of:

1. Mr. /Ms. _____
Name of the Nominee _____ Signature of Nominee/ Approved Claimant(s)

Address _____

OR

Mr. /Ms. _____
Appointed on behalf of minor Nominee _____ Signature of Nominee/ Natural Guardian
Natural Approved Claimant(s)

Address _____

AND

2. Mr. /Ms. _____
Name of Surviving Joint Hirer(s) _____ Signature of Surviving Joint Hirer(s)/ Approved
Claimant (s)

Address _____

Witness:

1.	Signature:		2.	Signature:
	Name:			Name:
	Occupation:			Occupation:
	Address:			Address:

ACKNOWLEDGEMENT

* I, Mr./Ms. _____ [Nominee/ Approved Claimant(s)]
 * We, Mr./Ms. _____ [Nominee/ Approved Claimant(s)]
 Mr./Ms. _____ and Mr./Ms. _____ the survivors of the joint hirers/Approved Claimant(s), hereby acknowledge the receipt of the contents of the safety locker comprised in and set out in the above inventory together with a copy of the said inventory.

1. Mr. /Ms. _____
 Nominee(s)/Approved Claimant(s) _____ Signature(s)

2. Mr. /Ms. _____
 Survivor/Approved Claimant(s) _____ Signature (s)

3. Mr. /Ms. _____
 Survivor/Approved Claimant(s) _____ Signature (s)

Place _____ :

Date :

(* Delete whichever is not applicable)

Form of Inventory of Articles Left in Safe Custody with Banking Company

The following inventory of articles left in safe custody with _____ Branch, by Mr./Ms. _____ (deceased) under an agreement/receipt dated _____ was taken on this _____ day of _____ 20 _____.

Sr. No.	Description of Articles in Safe Custody	Other Identifying Particulars, if any

The above inventory was taken in the presence of:

1. Mr. /Ms. _____
Name of the Nominee _____ Signature of Nominee/ Approved Claimant(s)

Address _____

OR

Mr. /Ms. _____
Appointed on behalf of minor Nominee _____ Signature of Nominee/ Natural Guardian
Natural Approved Claimant(s)

Address _____

Witness:

1.	Signature:	2.	Signature:
	Name:		Name:
	Occupation:		Occupation:
	Address:		Address:

I, Mr./Ms. _____ [Nominee/appointed on behalf of minor Nominee/Approved Claimant(s)], hereby acknowledge the receipt of articles comprised in and set out in the above inventory together with a copy of the said inventory.

1. Mr./Ms. _____
Nominee(s)/Approved Claimant(s) _____ Signature(s)

2. Mr./Ms. _____
Appointed on behalf of minor Nominee _____ Signature (s)
Natural Guardian/Natural Approved Claimant(s)

Place:

Date:

Format of Letter of Indemnity – Missing persons

(To be taken on stamp paper of requisite amount/or franking to be done of requisite amount)

To,

HDFC Bank Ltd.

IN CONSIDERATION OF your paying or agreeing to pay the balances, delivering or agreeing to deliver contents of safe deposit locker, articles kept in safe custody, shares & securities in safe custody held at the credit of and/or in the name of _____, the missing as mentioned hereunder:

Account No.		Nature of Deposit		Balance/Principal Amount			
Safe Deposit Locker No./Sealed Box in Safe Custody Account No.		Details of the Inventory of the Locker/Articles in Safe Custody					
		Description Value		Weight			
Shares/ Securities Custody A/c. No.		Details of Shares & Securities					
Date of issue	Name of the Company	Distinctive Nos.	Folio No.	No. of Shares/ Securities	Face Value	Total Face Value	Total Market Value as on

without production of Letters of Administration or a Succession Certificate to his/her estate or a certificate from the Controller of Estate Duty to the effect that estate duty has been paid or will be paid or none is due.

I _____ being the nominee of the missing , and, do hereby, for myself and our heirs, legal representatives, executors and administrators, jointly and severally, UNDERTAKE AND AGREE to indemnify you and your successors and assigns against all claims, demands, proceedings,

losses, damages, charges and expenses which may be raised against or incurred by you by reason or in consequence of your having agreed to pay/or paying the said sum as aforesaid, having delivered or agreed to deliver the above mentioned assets to the nominee.

Signed, sealed and delivered by the above named on this _____ day of _____ Two thousand _____ at _____.

Signed and Delivered

X _____

X _____

X _____

X _____

X _____

(Heirs of the Deceased)

Format of Letter of Indemnity (joint holders) – Missing persons

(To be taken on stamp paper of requisite amount/or franking to be done of requisite amount)

To,
HDFC Bank Ltd.

IN CONSIDERATION OF your paying or agreeing to pay the balances, delivering or agreeing to deliver contents of safe deposit locker, articles kept in safe custody, shares & securities in safe custody held at the credit of and/or in the name of _____, the missing as mentioned hereunder:

Account No.	Nature of Deposit	Balance/Principal Amount					
Safe Deposit Locker No./Sealed Box in Safe Custody Account No.	Details of the Inventory of the Locker/Articles in Safe Custody						
	Description	Weight	Value				
Shares/ Securities Custody A/c. No.	Details of Shares & Securities						
Date of issue	Name of the Company	Distinctive Nos.	Folio No.	No. of Shares/ Securities	Face Value	Total Face Value	Total Market Value as on

without production of Letters of Administration or a Succession Certificate to his/her estate or a certificate from the Controller of Estate Duty to the effect that estate duty has been paid or will be paid or none is due.

I/We of the 1st Part – **(Name of Joint Holder/s)**

- 1)
- 2)
- 3)
- 4)
- 5)

being the claimant(s) of the missing , do hereby, for ourselves and our heirs, legal representatives, executors and administrators, jointly and severally, UNDERTAKE AND AGREE to indemnify you and your successors and assigns against all claims, demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred by you by reason or in consequence of your having agreed to pay/or paying the said sum as aforesaid, having delivered or agreed to deliver the above mentioned assets to the claimant(s) of 1st Part.

Signed, sealed and delivered by the above named on this _____ day of _____ Two thousand _____ at _____.

Signed and Delivered

X _____

X _____

X _____

(Heirs of the Deceased)

Signed and Delivered

by the above named

No Objection Certificate for appointing new Karta

Date:

Shri/Smt. _____ who was the Karta of our HUF Savings account held with your bank in the name of _____ bearing account no _____, died on _____.

I/We hereby appoint Shri/Smt. _____ as the new Karta of our HUF Savings account maintained with you and authorize to carry out all banking transaction.

Details of the Coparcener/s

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____