



THE TIRUR URBAN CO-OPERATIVE BANK LTD.

NOMINATION FACILITY : SETTLEMENT FORM OF CLAIM

CEO/Branch Manager
TIRUR URBAN CO-OPERATIVE BANK

PHOTO OF
NOMINEE

Dear Sir,

CLAIM AS NOMINEE FOR
PAYMENT OF BALANCES HELD IN THE DEPOSIT ACCOUNTS (SB/CA/RD (S)TDR) OF
ARTICLES HELD IN SAFE DEPOSIT/ SAFE CUSTODY/ SAFE DEPOSIT LOCKER OF
LATE

I _____ (Nominee) Son/Daughter of _____ hereby
declare that I am the Nominee / Appointed as Guardian on behalf of a Minor Nominee in the Account (s)
of Late _____ (Deceased) who has expired on _____

I, therefore submit my claim as a Nominee/Guardian on behalf of Minor Nominee for the Balance available
in Accounts with interest / *Articles Held in Safe Deposit, Safe Custody, Safe Deposit Locker of de-
ceased as per details given below to be paid/returned to me, by crediting to my A/C
No: _____ with _____ Bank
Branch _____ Ifs Code _____

Sl No	NATURE OF DEPOSIT (SB /CA/TDR/RD)	A/C NO	AMOUNT**	DATE OF MATURITY (If TDR)	Nature Of Liability to the Bank (If Any)	AMOUNT **
1.						
2.						
3.						
4.						
TOTAL DEPOSIT AMOUNT				TOTAL OF BANK LIABILITY		
*Safe Deposit/Safe Custody/Safe Deposit Locker			Sr No/Receipt No/Account No & Other Descriptions/Details			

*(Strike Out if not applicable)

** (The actual amount of claim with accrued interest will be worked out on the date of payment.)

I have enclosed all the documents mentioned below for your perusal and settlement of the claim.

Yours faithfully,

(Signature of Nominee/Person
Appointed on behalf of Minor Nominee)

Date:

Document Enclosed:

1. Passbook / (S) TDR of Deceased (In Original) ()
2. Cheque Book of Deceased ()
3. ATM Card of Deceased ()
4. Death Certificate ()
5. Nomination Receipt (If Available) ()
6. Identification Proof of the Nominee (Showing relationship with Deceased) ()
7. Address Proof of the Nominee ()
8. Others (Specify) ()

Address for Correspondence of Nominee

Shri./Smt _____

Mobile/Ph: _____

TUCBA/c No: _____

Witness (Member / A/c Holder)

(1) Shri./Smt _____

A/c No./Member No. _____

(2) Shri./Smt _____

A/c No./Member No. _____

FOR OFFICE USE ONLY

Report of the Recommending Authority:-

I have made necessary inquiries about the claim made by the Nominee / Guardian on behalf of the Minor Nominee & satisfied that the claim may be settled. All the necessary documents have been obtained. The claim may be paid/articles returned to the Nominee / Guardian on behalf of the Minor Nominee.

Any other Remarks:

.....
.....
.....
.....

Place: _____

Date: _____

Name & Designation :
(Recommending Authority)

Signature with Date

Sanctioned and Payment/Returning of Articles/contents to Nominee / Guardian on behalf of the Minor Nominee Allowed:

Place: _____

Date: _____

Name & Designation :
(Sanctioning Authority)

Signature with Date

#Disbursement & Record :

* Amount of Rs _____ /- (Rupees _____) paid by way of Banker's Cheque No. _____ Dated _____ and receipt obtained.

'OR'

* Credited to Nominee's Account No _____ maintained with _____ Branch and copy of statement of account carrying the relevant entry maintained on record as part of the claim settlement.

'OR'

* Credited to Nominee's Account No _____ maintained in India with _____ Bank _____ Branch at _____ through RTGS/NEFT vide UTR No _____ dated ____ / ____ /20____ and copy of acknowledgement of electronic transfer credit maintained on record as part of the claim settlement.

Place : _____

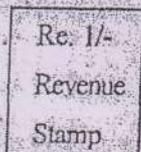
Date : _____

Branch Manager / Accountant

RECEIPT

(In Case Payment to Nominee/Guardian of Minor Nominee made through BANKER CHEQUE)

Received from THE TIRUR URBAN CO-OPERATIVE BANK _____ Branch an Amount of Rs _____ /- (Rupees _____) by way of Banker's Cheque No. _____ Dated ____ / ____ /20____ towards full and final settlement of Balance in the credit of SB/CA/RD/(S) TDR Accounts No: _____ of _____ of _____



(Signature)

Date: ____ / ____ /20____

Name : _____

Address: _____

#For Articles in Safe Deposit/Safe Custody/ Safe Deposit Locker user separate Acknowledgement sheet with full Description/Detail if Applicable