



The Jammu & Kashmir Bank Ltd.

Branch Account

Claimants of Deceased Account Holder Form

For payment of balance amount

I / we hereunder furnish the particulars in reference to above captioned account for payment of balance of the account against indemnity bond.

1. Name of deceased account holder

2. Name (s) of the applicants

3. Amount claimed

(in figures)

(in words)

4. Whether the deceased had executed a will? (tick whatever is applicable) Yes No

If yes, Names of Executors therein

5. Has probate been obtained? (tick whatever is applicable) Yes No

6. If deceased has not left a will, has any form of legal representation been obtained, such as succession certificate, letters of administration OR an administrator generalis certificate?

7. Whether the deceased was married? (tick whatever is applicable) Yes No

8. Names of widow/widower, child or children of a predeceased child?

Any minor, if so, name of legal guardian

9. Names of surviving parents, brother, sister

Or children of predeceased brother or sister

10. Relationship of the claimants with the deceased?

Are they all legal heirs? (tick whatever is applicable) Yes No

11. If the deceased was a Hindu, balance of account is claimed as joint family property,

Who are the other member of the joint family? _____

Who are karta of joint family? _____

12. Are they any claimants / heirs other than those joining in the indemnity bond ?

13. Has the deceased left any other Assets?

If so, who are the claimants thereto? How has / have such claimants acquired title thereto?

14. Was the deceased in service? If so was he entitled to any provident fund?

Who were the claimants/nominee who received such fund?

15. Was the life of the deceased assured? If so, to whom have the money been paid?

Was there a nomination of assignment in respect of the assurance money? If so, to whom ?

16. Was the deceased doing any business? Who are the claimants who took over the business ?

17. Names of two sureties with full particulars and occupation

1. Full Name (IN BLOCK LETTERS)

2. Father's Name / Spouse's Name (IN BLOCK LETTERS)

3. Date of Birth (DD / MM / YYYY) _____ 4. Nationality (Other than Indian) _____

4. Gender Male Female

5. Address with Telephone/Fax Mobile / E-mail etc.

Permanent Address _____

Pin code _____ City _____

Phone (With STD code) _____ Mobile _____

E - mail _____

6. Marital Status Single Married 7. Average yearly income _____

7. Occupation _____

1. **Full Name** (IN BLOCK LETTERS)

2. **Father's Name / Spouse's Name** (IN BLOCK LETTERS)

3. **Date of Birth** (DD / MM / YYYY) _____ 4. **Nationality** (Other than Indian) _____

4. **Gender** Male Female

5. **Address with Telephone/Fax Mobile / E-mail etc.**

Permanent Address _____

Pin code _____ City _____

Phone (With STD code) _____ Mobile _____

E - mail _____

6. **Marital Status** Single Married 7. **Average yearly income** _____

7. **Occupation** _____

18. **Names of all the claimants**

(a) _____

(b) _____

(c) _____

(d) _____
