

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

ı.	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		
of the	e deposits/deliver the contents of tl (decea	nited, branch, to pay the proc he locker mentioned above to me as nomined sed constituent). I hereby declare that the all d full and that I have not omitted or suppressed columns.	e of bove
Place:			
i idee.			
Signat	ture of the Claimant (Nominee)		
J			



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

То		
The Branch Manager		
HDFC Bank LimitedBranch		
DIBITICIT		
I, Shri/Smt./Kum N	ominee/appointed on behalf of the minor no	minee hereby declare
that I am the Nominee /appointed on	behalf of the minor nominee of the	deceased Shri/Smt.
	at I am nominated to claim the deposit monie	es/articles held in Safe
Custody/Safety Locker with	_ branch by Shri/Smt. deceased.	
The deposit monies/articles held in Safe Custo	dy/Safaty Locker are held in account No(s)	
Locker No. (s) / Safe Custo		
deceased.		
Shri/Smt		
Address	Signature	
(Nominee/appointed on behalf of minor nomin	iee) Date	
Witness:*		
1. Magistrate or Judicial Official	2. An officer of Central or State Govt.	
Name	Name	
Address	Address	
Signature	Signature	
Signature	Signature	
3. An officer of a Bank		
Name		
Name of the Bank / Branch		
-		
Signature		
OR		
4. Two persons acceptable to the bank		
	ess	
Signature Signa	ature	
(*Strike out whichever is not applicable)		



Format of Claim Application from Legal Heirs

The B HDFC	ranch Manager, Bank Branch
Dear S	Sir,
Re: Cl	aim 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) b) c)	receive the amount due on the deposit(s) detailed below, receive the contents of safe deposit locker(s)/articles in safe custody, 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)	Name, Age, Relation to the
	(other details for each legal heir are given in enclosed	Deceased
	Form 'D')	
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,	
11	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	1.
	(Particulars of sureties and Declarations from them are	2.
	furnished in the enclosed formats 'B' & 'C')	
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	
	hereby declare that the above statements and answers are true. I/We enclose an Indemnement 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,	ity -
1) 2) 3)		
	s/are hereby irrevocably authorised by me/us to receive the above stated sums/other assets a valid discharge/receipt (binding me/all of us) to the bank. I/We also enclose a separate Letter aimer in Form 'A' prescribed by the bar	
overc outst	hereby authorise the bank to recover the outstanding, together with interest thereon, a lraft/loan account standing in the name of the deceased. The bank may also recover tanding service charges, or any other dues payable by the decease request the bank to kindly sanction my/our claim made above.	he
	Name of Claimant(s) Signature of Claimant(s)	
1. 2. 3. 4. 5.		
Thum	b Impression of claimant (if illiterate)	
Name	e of the Claimant(s)	
Witne	ess for Thumb Impression	
Name	2	
Addre	ess	

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)



rrectly recorded".		
/itness		
gnature 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 A	assets belonging to the Dec	:eased			
Our Shri/Smt accounts/assets with you died on		ne following			
Account No./Locker No./ Safe Custody No., etc.	Balance				
I/We, the undersigned, along with Shri/Smt and 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					
behalf. I/We declare that the claiman	t Shri/Smt. sentative entitled to receive to the Bar	and Shri/Smt. siled above on our and their own and Shri/Smt. he amount of deposit/other assets k in pursuance of the request by			
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.

D .	
ι)ato.	
Date.	

Signature:



Format of Letter of Indemnity

HDFC Bank Ltd.		
•		the balances, delivering or agreeing to deliver ody, shares & securities in safe custody held at
•	•	e 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	he Locker/Articles in Safe Custody
-	Description Weight Value	
Shares/ Securities Custody A/c. No.	Details of Shares & Securiti	es
Date of Issue, Nan		Company, Distinctive Nos./ Folio No., No. of ue, Total Face Value, Total Market Value as on
		Succession Certificate to his/her estate or a st that estate duty has been paid or will be paid
I/We of the lst Part – 1) 2) 3) 4)		
5) being the claimant(s) of the I/We of the IInd Part – 1) 2)	e deceased, and	
being the Witness(s) for the representatives, executors indemnify you and your standardes, charges and expression consequence of your having agreed to deliver the above Part.	and administrators, jointly successors and assigns again penses which may be raised ag agreed to pay/or paying te mentioned assets to the cla	
Signed, sealed and delivered atat		his day of Two thousand





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

	ranch Manager, Bank Branch	
Dear	Sir,	
	Re: Claim for Balances an	d Other Assets
me to locked the na	by declare that I have received the legal represent or receive from your Bank the balance(s) in the across and/or articles in safe custody and/or shares & same of, the deceased.	count(s) and/or the contents of safe deposit securities in safe custody held with the bank in
	deration and necessary action.	
1.	Name in Full Occupation	
3.	Address – Office	
	- Residence	
4. 5.	Date of Birth and Age	
6.	Name of the Deceased 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					
Recei	ved from HDFC BANK LTD,				_ branch a sum of Rupees
			only sta	anding to the cr	edit of the deceased depositor
of the	e bank Mr. /Mrs. /Ms			in deposit	account(s) mentioned below
toget	her with interest thereon in full settle	ement of	my cla	im as the nomir	nee.
DEPO	SIT ACCOUNTS				
Sr. No			Acco	ount No.	Amount Received on the Deposit including Interest (Rs.)
Place: Date: Name	e of the Nominee	Signa	ture		
1.	Signature		2.	Signature	
	Name			Name	
	Occupation				
	Address			Address	
				<u>-</u>	



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 Vau			
of HDFC BANK LTD branch at							
* Hirec	l by Mr. /Ms	dec	s/her own name.				
* Hirec	l by Mr./Ms. 1	[Deceased				
2		Surviving Joint					
3		Hirers					
was ta	ken on this	day of	·				
	T						
Sr. No.		n of Articles in Safety Lo		Other Identifying Particulars, if any			
hirers/	approved claimant who produced the by breaking open t	(s)	neir instruct				
The ab	ove inventory was	taken in the presence of:					
1.	Mr. /Ms						
	Name of the Nor	ninee	Sign	ature of Nominee/ Approved Claimant(s)			
	Address						
		OR					
	Mr. /Ms Appointed on be	half of minor Nominee	_	ure of Nominee/ Natural Guardian ural Approved Claimant(s)			
	Address						
	,	AND					
2.	Mr. /Ms						
	Name of Survivin		nture of Sur aimant (s)	rviving Joint Hirer(s)/ Approved			
	Address						
	Witness:						
	. 7.0.1033.						



(* Delete whichever is not applicable)

Signature:		2.	Signature:
1.			orginature.
Name:			Name:
Occupation:			Occupation:
Address:			Address:
ACKNOWLEDGE * I Mr /Ms			[Naminas/ Appropriate Claimsont/s]]
1, 1411./1413.			
			[Nominee/ Approved Claimant(s)] the survivors of the joint
			eceipt of the contents of the safety locker
• • • • • • • • • • • • • • • • • • • •	_		gether with a copy of the said inventory.
1. Mr. /Ms		,	y
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:			



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

	following inventory of artic					
on th	is day of	20	anaç	green	ent/receipt dated	was taken
Sr.	-	Description of Articles in Safe Custody				Particulars,
The a	above inventory was taken in	the presence of:				
1.	Mr. /Ms					
	Name of the Nominee	Sig	ınatur	e of N	Nominee/ Approved (Claimant(s)
	Address					
	OR Mr. /Ms					
	Appointed on behalf of m	ninor Nominee	Si	_	re of Nominee/ Natu ral Approved Claimar	
	Address					
	Witness:		1	T		
1.	Signature:		2.	Sigr	nature:	
	Name:			Nar	me:	
	Occupation:			Occ	cupation:	
	Address:			Add	dress:	
Nomin the	Mr./Ms. inee/Approved Claimant(s)], a above inventory together w	hereby acknowled	ge th	e rece	eipt of articles compri	chalf of minor sed in and set out
Nom	Mr./Ms. inee(s)/Approved Claimant(Mr./Ms.	(S)			-	Signature(s)
Appo	ointed on behalf of minoral Guardian/Natural Approv					Signature (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)

То,								
HDFC Bank Ltd.								
IN CONSIDERATION OF contents of safe deposi the credit of and/or in t	t locker, articles l	cept in safe cu	stody, sh	ares & se	curit	ies in saf	e custody	
Account	No.	Natur	e of Dep	osit	Е	Balance/l	Principal	Amount
Safe Deposit Locker N Safe Custody Account		Details of	the Inven	itory of th	l ne Lo	cker/Arti	cles in Sa	fe Custody
		Description Value	n		We	ight		
Shares/ Securities Cus	tody A/c. No.	Details of S	Shares &	Securitie	S			
Date of issue	Name of the Company	Distinctive Nos.	Folio No.	No. of Shares/ Securiti		Face Value	Total Face Value	Total Market Value as on
		1	1					I
without production of certificate from the Con or none is due.								
I		g the nominee		_				
our heirs, legal represe AGREE to indemnify yo				-		-		



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 delive	red by the above named or 	n this	_ day of	_Two thousand
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)

Го, HDFC Bank Ltd.							
N CONSIDERATION OF y contents of safe deposit in the	ocker, article	s kept in safe	custody,	shares & sec	curities in	safe cust	
Account No.	Nature of [Deposit		Balance/I	Principal <i>i</i>	Amount	
Safe Deposit Locker No./Sealed Box in Safe Custody Account No.	Details of t	he Inventory	of the Lo	cker/Articles	in Safe C	ustody	
Custody Account No.	Description)M/a			Value	
	Description	1	vve	ght		Value	
Shares/ Securities Custody A/c. No.	Details of S	Shares & Sec	urities				
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
		1		1	1	ı	

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 lst Part.

Signed, sealed and deliver	ed by the above named on this	day of	Two thousand
Signed and Delivered X X (Heirs of the Deceased)			

Signed and Delivered by the above named



Format of NOC from coparceners HUF in case of death of Karta

ow mentioned HUF account demise of the Karta.
v (Tick anyone)
Signature
Signature



Format for opening pipeline funds for credits in deceased customer account

The Branch Manager,		
HDFC Bank Branch		
Dear Sir,		
/ we hereby declare being nominee / Joint holders / legal mentioned below would request opening of pipeline funds expected to be received in the name of the deceased accor-	account (product code 176) for credits
The Account would be held in the name of " account titled Deceased only. I am aware that no withdrawals will be permoaid at only the time of closure of account.		
Name of the deceased:		
Account number of the deceased:	_	
Expected timeline for all credits:		
Name of the Nominee / Joint holders / Legal heirs	Signature	



Format for opening estate account by executor of a deceased customer account

Name of the Legal Hells	Signature	
Name of the Legal heirs	Signature	
Name	Signature	
Name 3	Signature	
2 Name	Cianatura	
Name	Signature	·
Name and signature of the executors: 1.		
Account number of the deceased:		
Name of the deceased:		
I/ we legal heirs for the deceased account hol opening of an estate account operated by the challenged before any competent court of law	e executors and that the WILL	_
Dear Sir,		
HDFC Bank Branch		
The Branch Manager,		



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