

### Unclaimed Deposits: Common Claim Application Form

|  |                         |        |                   |
|--|-------------------------|--------|-------------------|
| The Branch Manager<br>Bank:<br>Branch: | UDRN No.(if available): |        | <b>Photograph</b> |
|  | Address:                |        |                   |
|  | Pin:                    |        |                   |
|  | Mob. No.                | Email: |                   |
|  | Date:                   |        |                   |

Dear Sir/Madam,

I furnish the following details/documents for activating the account/payment of the balance amount from my account.

- Name of the Customer(s):
- Type of Account: Savings Bank/Current account/Term Deposits/Others
- Account No.:

2. I/we could not operate account due to.....

3. I/we am/are submitting herewith my/our KYC documents (original documents for Bank's verification and copy of the same for Bank's record) for self/ on behalf of others (please specify)\* \_\_\_\_\_ mentioned as under along with recent photograph and request to claim the balance in the account.

| S.N | Name of the account holder(s) | KYC Document(s)(OVDs*)with details |
|-----|-------------------------------|------------------------------------|
| 1.  |                               |                                    |
| 2.  |                               |                                    |

#### Declaration:

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

| Name of the Claimant(s) | Signature(s) |
|-------------------------|--------------|
|                         |              |
|                         |              |

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

Received a request from.....for claiming balance outstanding in Unclaimed Deposits/ (A/c No... ..).

Bank:  
Branch:

Signature of Bank Official with Bank seal  
Date: