## **Death claim application cum Questionnaire form**

## RAJARAMBAPU SAHAKARI BANK LTD. (Scheduled Bank) REGISTERED OFFICE A/p - Peth, Tal — Walwa, Dist.- Sangli

	Branch Manager, Irambapu Sahak Bra	<b>xari Bank Lt</b> nch	td.,						
Dear	Sir,								
Re. :	Handover of	Original	Title	Docu	ments mortga		the	property	y being Late
	Shri/Smt			/	Origin	nal	docı	ument/s	being
				pled	ged	by	L	_ate	Shri/Smt
l/We	declare I/We am/	are the righ	tful lega	l heir/	s entitle	d to	receive	e the Ori	ginal Title
Docui	ments of the prop	perty being .					r	nortgage	d by Late
Shri/S	6mt		/	'Origina	al	do	cumer	nt/s	being
			-	lged	_	′		æ	•
		_					-		_
	claim and hand								
	ission of legal rep	oresentation	and for	that p	ourpose,	we s	submit	the part	iculars as
follow	/S :-								
1.	Full name of the	deceased :							
2.	Full name of the	applicant:							
3.	Particulars of oth	ner claimants	s, if any	:					
	Name	А	ge			Re	lation	to the De	eceased
1)									
2)									
3)									
4)									
5)									
6)									
7)									

4.	Are there any claimants/heirs other than those joining in the Indemnity Bond.
5.	<ul> <li>i) Description of the Original Documents submitted by the deceased as security:</li> <li>i.</li> <li>ii.</li> <li>iii.</li> <li>iv.</li> </ul>
6.	Letter of Consent from other claimants (in the prescribed form)
7.	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?
8.	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 ?
9.	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 ?
10	.If the deceased was a Hindu and the original title deeds/documents are claimed as joint family property who are the other members of such joint family ? Who is

11. What is the position regarding liability to and payment of Estate Duty, Income

12. Has the deceased left any other assets? If so who is/are the claimant/s having

the Karta of such joint family?

acquired title to such assets ?

Tax, Sales Tax and other Government dues?

13. Was the deceased doing any business or was he/she in service? If in service was he/she entitled to any Provident Fund? If he/she was, whom did he nominate to receive such Provident Fund? Have Provident Fund dues been paid If so, to whom?
14. Was the life of deceased insured? If so' to whom have the moneys been paid . Was there a nomination or assignment in respect of the assurance moneys ? I so' to whom ?
15. Proof of claimant's right for handing over the Original Title Documents of the property being
<ul><li>16. Name of the sureties for the loan availed by the deceased</li><li>(1)</li><li>(2)</li></ul>
17. Whether the claimant has any liability (for advance raised from the bank) of indirect liability (as guarantor for advance raised by others), if so, please state the amount and name of the borrowers' If not, state accordingly.
18. Any other facts which the applicant/s wants to state in support of his/their claim.
I/We hereby declare that the above statements and answers are true.
Signature of the Claimant
Thumb Impression of claimant (if illiterate)
Name of the Claimant
Witness for Thumb Impression :  Name : Address:

Note: In case the claimant is illiterate, he/she should affix his/her Thumb Impression in the space meant 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** 

THUMB IMPRESSION OF CLAIMANT