

**Unclaimed Deposits /Inoperative Accounts: Claim Form**

Date:

From.....

The Branch Manager  
Central Bank of India,  
\_\_\_\_\_Branch

Dear Sir / Madam,

I/We the undersigned Mr./Mrs./Ms/\_\_\_\_\_in  
the capacity of

- Self
- Nominee
- Legal Heir
- Others (please specify)

request for settlement of claim, for Deposits account(s) held with your Bank in the name(s) of  
Mr./Mrs./Ms/Others\_\_\_\_\_

Name Account No. and Other details:  
(with documentary proof)

Name of Claimant(s) :

Communication Address with Pincode:

DOB                      PAN No.                      Passport No.                      Tel./Mob. No.                      email id

Aadhar No.                      Voter card no.                      others

I/We understand that claim will be settled post due diligence and authentication of documents and in subject to bank's process & policy. I/We undertake to submit the document as may be necessary for the Bank to process the claims and agree to execute the required documents to settle the claim.

Signature: \_\_ Name :

\_\_\_\_\_

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

Date:

Received a request from Mr./Mrs./Ms. \_\_\_\_\_ for  
claiming Unclaimed Deposits/Inoperative Accounts.

Central Bank of India  
\_\_\_\_\_Branch

Signature of Bank Official with Bank seal