FORMAT

Claim application form for settlement of Savings Certificates of the deceased holder who died on................... where there is no nomination or legal evidence and total amount of all certificates in the name of deceased holder does not exceed Rs. ₹00,000/-.  

To

The Postmaster,

.................................

Sir,

In connection with the settlement of claim of Post Office Certificates standing in the name of the deceased................................. I hereby claim the payment of the value of the Post Office Certificate(s) detail of which is given below:-

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<tr>
<th>Sl.No</th>
<th>Scheme</th>
<th>Registration number &amp; date of issue</th>
<th>Office of issue</th>
<th>Amount</th>
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In support of the claim, I hereby submit :-

(i) Proof of Death of the deceased issued by appropriate authority in original.

(ii) Letter of indemnity in original duly attested by Notary Public.

(iii) Affidavit and letter of disclaimer on affidavit duly attested by Oath Commissioner.

Yours faithfully,

Witness (1)...........................(Signature)  
Address..............................................  
..........................................................  
Witness(2)...........................(Signature)  
Address..............................................  
..........................................................  
Witnesses accepted

Signature of Sr. PM/PM/SPM