

CHECK LIST FOR SETTLEMENT OF NATIONAL SAVINGS SCHEME CLAIMS.

Type of claim	Documents to be submitted by Claimant.	SPM/PM action
Claim with Nomination	<ol style="list-style-type: none"> 1. Form 11 in duplicate duly filled by the Claimant. 2. Copy of ID/Address proof duly self-attested by the claimant. 3. Two witnesses be obtained in Form 11 along with their ID/Address proof self-attested. 4. Original Passbook/certificate. 5. Death Certificate. 6. Claimant POSB account details for SB credit. 7. Claimant Bank A/C first page copy duly self-attested with ECS mandate form for ECS credit. 	<ol style="list-style-type: none"> 1. Verify the account & nomination details with Finacle. 2. Check the filled claim forms and make the following remarks in Form 11. <ul style="list-style-type: none"> ✓ Balance Verified. ✓ Nomination Registered. ✓ No Court attachment. ✓ No Counter claim. ✓ Not pledged. 3. Verify the Death certificate and note the remark as “Compared with Original and Found Correct “with SPM/PM seal & Signature. 4. After scrutinising the claim papers, the claim may be sanctioned by the SPM/PM irrespective of the amount.
Claim without Nomination but with production of Legal heir Certificate/Succession Certificate issued by court of law.	<ol style="list-style-type: none"> 1. Form 11 in duplicate duly filled by the Claimant. 2. Copy of ID/Address proof duly self-attested by the claimant. 3. Two witnesses be obtained in Form 11 along with their ID/Address proof self-attested. 4. Original Passbook/certificate. 5. Death Certificate. 6. Legal heir certificated issued by Tahsildar. 7. Form -14 Letter of disclaimer in Non Judicial stamp paper for 200/- duly attested by Notary Public / Oath Commissioner. (signed by all legal heirs except Claimant) 8. Claimant POSB account details for SB credit. 9. Claimant Bank A/C first page copy duly self-attested with ECS mandate form for ECS credit. <p>TS SPM/LSG SPM =50000/- HSG II SPM =100000/- SPMs/PMs in HSG I offices can sanction the claim without any limit if legal evidence/Succession certificate produced.</p>	<ol style="list-style-type: none"> 1. Verify the account details with Finacle. 2. Check the filled claim forms and make the following remarks in Form 11. <ul style="list-style-type: none"> ✓ Balance Verified. ✓ Nomination not Registered/legal heir certificate produced. ✓ No Court attachment/ No Counter claim. ✓ Not pledged. 3. Verify the Death certificate and note the remark as “Compared with Original and Found Correct “ with SPM/PM seal & Signature. 4. After scrutinising the claim papers, the claim may be sanctioned by the SPM/PM up to his limit. Beyond limit the claim papers must be forwarded to DO for issue of sanction. Note: SPMs/PMs in HSG I offices can sanction the claim without any limit if legal evidence/Succession certificate produced.

<p>Claim without Nomination /without production of Legal heir Certificate/Succession Certificate issued by Court of law.</p> <p>Claim only preferred after expiry of Six (6) Months from the date of death of the depositor where no nomination is in force and if no succession certificate or probate of will or letter of administration of the deceased estate or Legal heir certificate is produced during the period or up to the date of sanction.</p>	<ol style="list-style-type: none"> 1. Form 11 in duplicate duly filled by the Claimant. 2. Form 15 – Bond of Indemnity in Non Judicial stamp paper for 500/- duly attested by Notary Public. (signed by claimant, Sureties, witnesses) 3. Form 13 Affidavit in Non Judicial stamp paper for 200/- duly attested by Notary Public/Oath Commissioner. (signed by all legal heirs) 4. Form -14 Letter of disclaimer in Non Judicial stamp paper for 200/- duly attested by Notary Public / Oath Commissioner. (signed by all legal heirs except Claimant) 5. Copy of ID/Address proof duly self-attested by the claimant. 6. Two witnesses be obtained in Form 11 along with their ID/Address proof self-attested. 7. Original Passbook/certificate. 8. Death Certificate. 9. Claimant POSB account details with copy of first page for SB credit. 10. Claimant Bank A/C first page copy duly self-attested with ECS mandate form for ECS credit. 	<ol style="list-style-type: none"> 1. Verify the account with Finacle. 2. Check the filled claim forms and make the remarks in Form 11 <ul style="list-style-type: none"> ✓ Balance Verified. ✓ Nomination not Registered/legal heir certificate not produced. ✓ No Court attachment. ✓ No Counter claim. ✓ Not pledged. 3. Verify the Death certificate and note the remark as “Compared with Original and Found Correct “with SPM/PM seal & Signature. 4. After scrutinising the claim papers, the claim may be sanctioned by the SPM/PM up to his limit. <p>Note: - Beyond limit the claim papers be forwarded to DO for issue of sanction.</p> <ul style="list-style-type: none"> ● TS SPM/LSG SPM = Rs.50,000/- ● HSG I & II SPM/ PM = Rs.1,00,000/-
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Compiled by: - M.SIVAKUMAR, LSG SPM, SAIDAPETTAI –ARNI SO -632301. **This is only for ready reference for more details and confirmation kindly refer to the POSB CBS MANUAL Volumes and relevant SB orders.**

Reconciliation certificate in case of a difference in name of nominee

Certified that the real name of the nominee in POSB Account / Savings certificate Number

dated is..... He/She also used to be called by

(Name). The name as mentioned in the nomination of above POSB Account/Savings Certificate and the name in the KYC Document, is that of one and the same person viz., the nominee.

Date /Place

Signature

Name (in block letters)

Designation stamp

Reconciliation certificate in case of a difference in name of deceased depositor/investor

Certified that the real name of the deceased depositor/investor of POSB Account/ Savings certificate Number dated was..... He / She also used to be called by.....
..... (Name). The name as mentioned in POSB Account/Savings Certificate and in the Death Certificate, is that of one and the same person viz., the deceased depositor/investor.

Date /Place

Signature

Name (in block letters)

Designation stamp.....

Letter of consent on behalf of minor(s) by the Natural Guardian / Legal Guardian

I, _____ aged _____ years do hereby declare that the deceased _____ was my _____ . I am the Father/Mother and natural Guardian/ Legal Guardian of the minor(s) whose name etc. are furnished hereunder. They are under my care and protection.

It is certified that the minor(s) is/are alive and that the money is required on behalf of the minor(s). On payment of the said amount to _____ as aforesaid I free the Post Office from all responsibilities arises on account of such payment.

Sl No	Name of & Address of the minor	Sex	Age	Remarks

Signature of the Applicant

Witness:

1.

2.