

Annexure 2: Declaration from the Nominee/Survivor- Account (Deceased)

To be used when the account has nomination or survivorship clause.

Date: -----

To,

Citibank N.A

Re: A/c no: -----

Dear Sirs,

I/We declare that the account holder(s) _____ died on -----I/We, -----
(Relationship of deceased) of the deceased residing at XXXXXXXXXXXX is/are the registered nominee
of the captioned account(s) & is over 18 years of age as the date of this claim to receive payment on
his/her behalf including current a/c balances & time deposits.

OR

- ✓ I/We declare that the account holder(s) _____ died on -----, -----
-(Relationship of deceased) of the deceased residing at ----- is/are the registered
nominee of the captioned account(s). The nominee ----- of the captioned account (s),
is minor as of the date of this claim. I, ----- am the person authorized to receive
payment on his/her behalf for the said account including any Term deposits. Letter of
Guardianship or Court order for appointment of guardian is attached.

There is no order of a court of law or any dispute on account of which the Bank may not make such
payment to me. I/We (Registered nominee (s)) / Legal guardian of registered nominee, in case
registered nominee is a minor (Please select applicable option) confirm that I/We(Registered
Nominee)/ Legal guardian of registered nominee, in case registered nominee is a minor (Please select
applicable option) receive the payment from the Bank in the trust for the benefit of the legal heir(s)
and beneficiaries of the deceased. I/We confirm that i/We will be responsible to ensure that the
amount is made available to such persons. Accordingly, I/We ensure that the rights that any person
has to the amount, are not prejudicially affected and I/We will be solely liable if the rights are so
affected.

Yours Faithfully

(Signature of registered nominee

/ legal guardian of registered nominee)

(Name of Signee)

Annexure 2 (Continued...)

☐ Close the captioned account(s) and send the proceeds of the account balance(s) in name to address/ bank account as indicated below

☐ NEFT ☐ RTGS ☐ A/c to ac/ transfer ☐ Demand Draft ☐ Foreign Currency Transfer

Beneficiary Name:

Beneficiary Bank :

Beneficiary A/c Number:

IFSC/SWIFT/Routing Code:

Beneficiary Address: (In case of Cheque/Demand Draft)

Currency of Transfer : Mention Currency details.

Note: If you are a surviving account holder of a Term deposit account and you do not have a survivorship consent from all account holders in place for your account, you must also complete annexure 3, if you choose to pre-terminate the deposit.

OR

☐ Close the account & use the applicable account balance(s) to open a new account in my name

- If you are a surviving account holder of a Term deposit account and you do not have a survivorship consent from all account holders in place for your account, you must also complete annexure-3, if you choose to pre terminate the deposit
- Please note that in order to open a new account, you must complete the applicable account application from (Existing account holder or new applicant) and provide any documents required for account opening. You must also note that opening of a new a/c is at sole discretion of Citibank and you will not hold Citibank liable in case your application is rejected for any reason.

OR

☐ Close the captioned Account(s) and send a check for the amount of the applicable account balance(s) in name of Account holder Company/HUF/Firm as indicted below

Name: -----

Address: -----

Bank details: -----

In connection with the submission of this letter application, i/we attest and confirm the following:

- I/We (Registered Nominee (s)) are over 18 years of age as of date of this claim/ I/We are the duly appointed legal guardian of ____ (Registered Nominee) and are authorized to receive payments in their behalf (please select applicable option)
- There is no order of a court of law or any dispute regarding the account(s) that restrains the bank to release moneys in the captioned account(s).
- The information provided in this letter application is complete and accurate to the best of my knowledge, information and belief and I will be liable to compensate the Bank for any loss it may suffer as a result of any incompleteness or inaccuracy in this information.
- I/we hereby indemnify and hold the Bank harmless and free at all times, from any and all harm, expenses, liabilities, damages, claims and legal proceedings, including without limitation, any attorney's fees and costs, whether direct or indirect, which the Bank may suffer at any time as a consequence of, or arising out of taking or attempting to take or refusing to take or omitting to take, actions based on the information by me in this declaration/letter application or otherwise in connection with this claim by me/us in this declaration/letter application or otherwise in connection with this claim.
- The Bank may be pursuant to a written demand call on the undersigned to make good any claim pursuant to this indemnity and the undersigned shall without any protest or demur, deposit such amounts as may be claimed by the Bank. This declaration/letter application shall be binding to all our successors, employees, agents, executors and administrators.
- Registered nominee(s) / Legal guardian of registered nominee (please select applicable option) confirm that I/We(Registered nominee) / Legal guardian of registered nominee (please select applicable option) receive the payment from the Bank in trust for the benefits of the legal heir(s) and beneficiaries of the deceased i.e such payment to me/us shall not affect the right or claim which any person may have against me/us. I/We confirm that i/We will be responsible to ensure that the amount is made available to such persons. Accordingly, I /We will ensure that the rights that any persons has to the amount, are not prejudicially affected and I/We will be solely liable if the rights are so affected.

I/We also submit the following documents in support of this letter

Application 1: -----

2: -----

3: -----

Signature

Name:
