

Sangli Urban Bank



सांगली अर्बन बँक

वारसांनी भ्रून द्यावयाचा फॉर्म
स्टॅम्प पेपर वर

वारसनोद नसणाऱ्यांसाठी

सांगली अर्बन को-ऑपरेटिव्ह बँक लि., सांगली. (शेड्युल्ड को-ऑप. बँक)

प्रधान कार्यालय : ४०४, खणभाग, सांगली ४१६ ४१६

Annex VIII

LETTER OF DISCLAIMER/ NO OBJECTION

(To be duly stamped as per the Stamp Act applicable to the State)

The Branch Manager

Sangli Urban Co-op. Bank Ltd., Sangli.

_____ Branch

Dear Sir,

Details of deposit account(s)/ safe custody articles/ safe deposit locker in the name of Shri/ Smt./ Kum. _____

_____ since deceased are as follows:

a. Deposit Accounts

Sr. No.	Nature of Deposits (SB/ CA/ TD, etc.)	Account No.	Amount	Date of Maturity (in case of TD)
1				
2				
3				
4				
Total				

b. Safe Deposit Locker No. _____ Mode of Holding : _____

c. Safe Custody Article Receipt No. _____

Details of Articles (if known) : _____

2. With reference to the above account(s)/ safe deposit locker/ safe custody articles, I/ We, the legal heirs of Shri/ Smt./ Kum.

_____ (Name of deceased customer), have to advise that we have no interest in the above deposits/ assets and as such we have no objection to your paying the *balance amount in the above account(s)/ releasing the contents in safe deposit locker/ returning the safe custody articles lying with you in the name of the aforesaid Shri/ Smt./ Kum.

_____ (Name of the deceased customer) to Shri/ Smt./ Kum.:

1. _____

2. _____

3. _____

4. _____

Such payment of the *balance in the above account(s)/ release of the contents in safe deposit locker/ return of the safe custody articles would be completely binding on us and we will not question the bank's action in doing so. I/ We undertake to bind ourselves, our heirs and legal representatives not to revoke the declaration made herein.

Sr. No.	Name of the Non-claimant Legal Heir(s) (who relinquish their rights)	Age (yrs.)	Signature
1			
2			
3			
4			

Signed on this _____ day of _____ two thousand _____

*(Delete whichever is not applicable)