



FORM 'G'

Application for withdrawal by nominees/legal heirs under the Public Provident Fund Scheme, 1968

To
The Branch Manager
Bank of India
_____ Branch

Sir,

I/We, _____
the nominee(s)/legal heir(s) of Late _____
wish to withdraw the entire amount standing to the credit of the deceased; in the said Accounts.

Please find enclosed :

- a) A certificate in regard to the death of the subscriber
b) *Certificate in regard to the death of Shri/Smt./Kum. _____
_____ & Shri/Smt./Kum. _____
_____ also the nominee(s) appointed by the subscriber.
c) **Succession Certificate/Letters of Administration/Attested Copy of the Probated Will of the
deceased subscriber, issued by _____ High Court.

Place: _____

Date : _____

.....
Signature or Thumb Impression
of the Claimants

*Delete if not applicable

**Strike Off if there is a valid nomination

FOR THE USE OF BRANCH

Withdrawal of Rs.: _____ (Rupees _____) sanctioned

Date of Withdrawal : __.__.____

(Space for Branch Stamp)

RECEIPT TO BE SIGNED BY CLAIMANT

Received the sum of Rs. _____ (Rupees _____ Only),
from the Bank of India _____ in full settlement of my/our claim.

Place: _____

Date : __.__.____

.....
Signature(s) or Thumb Impression of Claimants

ANNEXURE – I TO FORM ‘G’
(LETTER OF INDEMNITY)

To
The Branch Manager
Bank of India
_____ Branch

Sir,

In consideration of your paying or aggregating to pay me/us _____
_____ (Names of Legal Heirs) the sum of Rs. _____
standing to the credit in Public Provident Fund Account No. _____ with your Bank,
in the name of _____ without production of Letters of
Administration or a Succession Certificate to the estate of the deceased _____
_____ (Name of the Subscriber) or a certificate from the
Controller of Estate Duty, to the effect that Estate Duty has been paid or will be paid or none in due,
I/We, _____ and we _____ (sureties),
do hereby for ourselves and our heirs, legal representatives, executors and administrators, jointly and
severally undertake and agree to indemnify you and your successors and assigns, against all claims,
demands, proceedings, losses, damages, charges and expenses which may be raised against or incurred
by you by reason or in consequence of having agreed to pay/or paying me/us, the sum as aforesaid.

In witness whereof we have hereunto set your hands _____
on this _____ day of _____, in the presence of witnesses.

Signed and delivered by the above named heir/heirs of the deceased

Signed and delivered by the above named sureties

- 1.
- 2.

Names and Addresses of Witnesses

- 1.
- 2.

ATTESTED
NOTARY PUBLIC

**ANNEXURE – II TO FORM ‘G’
(AFFIDAVIT)**

To
The Branch Manager
Bank of India
_____ Branch

Sir,
I/We, _____ aged
____ yrs., aged ____ yrs., aged _____ yrs., Husband/Wife/Son/Daughter of the said
Late _____, resident of _____,
do hereby declare and solemnly affirm as under :

1. That I/We am/are the only heir(s) of the deceased _____
who died at _____ on _____. I/We alone represent the estate of
Shri/Smt. _____
2. That the deceased _____ did not leave
any Will and therefore I/We am/are the only successor(s) to the estate of the said deceased.
 - a. _____
 - b. _____
 - c. _____
 - d. _____

DEPONENTS

VERIFICATION :

I/We, the above named deponents do hereby verify on solemn affirmation in
_____ (name of Place) that the contents of this Affidavit are true to our
knowledge and nothing material has been concealed.

Dated : _____

1. _____
2. _____
3. _____
4. _____

Attested



**ANNEXURE – III TO FORM ‘G’
(Letter of Disclaimer on Affidavit)**

To
The Branch Manager
Bank of India
_____ Branch

Sir,
I/We, (i) _____ Husband/Wife of _____
_____ residents of _____

ii) Son/Daughter of _____ do hereby solemnly affirm and declare as follows :

- a. That Shri/Smt. _____ dies intestate on _____._____._____ leaving behind us _____ his only heirs
- b. That we _____, heirs of our Late Father/Mother, for ourselves and on behalf of our heirs, executors, representatives and assigns do hereby relinquish our claims to the balance of Rs. _____, which may be credited to the Account sought by our Mother/Father to be opened in your Branch in the name of the estate of the said _____ deceased Father/Mother after the realization of Draft No. _____ on _____ issued by _____ (name of Bank) and we have no objection whatsoever in the balance in the above referred Account No. _____ together with Interest, if any, accrued thereon, being paid by the Bank to our said Mother/Father Smt./Shri _____

- 1. _____
- 2. _____
- 3. _____
- 4. _____

DEPONENTS

VERIFICATION :

I/We, the above named deponents do hereby verify on solemn affirmation that the contents of this Affidavit are true to our knowledge.

DEPONENTS

Dated : _____._____._____

I identify the Deponent who is personally known to me and who has signed in my presence.

Dated : _____._____._____

ATTESTED

Oath Commissioner