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

To,
The Branch Manager,
AXIS Bank Limited,
_____ Branch

I/We _____ the nominee(s)/legal heirs(s) of
late _____ the subscriber to Public Provident Fund Account No. _____ 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/Shrimati/Kumari _____
and Shri/Shrimati/Kumari _____ 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.
- d) Letter of indemnity.
- e) Affidavit.
- f) Letter of disclaimer on affidavit.

Place : _____

Date :

*Delete if not applicable

**Strike off if there is a valid nomination

Signature(s) or thumb Impression(s)
of claimants

FOR BRANCH USE

Withdrawal of ₹ _____ (Rupees _____)
sanctioned.

Date of withdrawal:

Branch Stamp

RECEIPT TO BE SIGNED BY CLAIMANT

Received the sum of ₹ _____ (Rupees _____)
from the AXIS Bank _____ in full settlement of my/our claim.

Place : _____

Date :

Signature(s) or thumb Impression(s)
of claimants

Annexure I to Form G
(Letter of indemnity)

To,
The Branch Manager,
AXIS Bank Limited,
_____ Branch

In consideration of your paying or agreeing to pay me/us _____ (Names of Legal heirs) the sum of ₹ _____ (Rupees _____) standing 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 Late Shri/Smt _____ (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. Attested _____

2. Notary Public _____

Annexure II to Form G
(Affidavit)

To,
The Branch Manager,
AXIS Bank Limited,
_____ Branch

I/We _____ Husband of/wife of
late _____ aged _____ aged _____ aged _____ sons/daughters of the
said late Shri/Smt _____ 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 the 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:

D	D	M	M	Y	Y	Y	Y
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1. _____
2. _____
3. _____
4. _____

Attested: _____

Oath Commissioner Deponents: _____

Annexure III to Form G
(Letter of disclaimer on Affidavit)

To,
The Branch Manager,
AXIS Bank Limited,
_____ Branch

I/We

(I) _____ husband of/wife of _____
Residents of _____
(ii) _____ son of/daughter of _____

Do hereby solemnly affirm and declare as follows:

- a. That Shri/Smt. _____ died intestate on _____
leaving behind us _____ his/her only heirs.
- b. That we _____ heirs of our late father/mother for
ourselves and on behalf of our heirs, executor, representatives and assigns do hereby relinquish our claims to the
balance of ₹ _____ (Rupees _____) 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 Mrs./Mr. _____
1. _____
2. _____
3. _____

Deponents: _____

VERIFICATION:

We the above-named deponents do hereby verify on solemn affirmation that the contents of this affidavit are true to our
knowledge.

Dated:

D	D	M	M	Y	Y	Y	Y
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Deponents: _____

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

Dated:

D	D	M	M	Y	Y	Y	Y
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Attested: _____

Oath Commissioner: _____