

**AFFIDAVIT CONCERNING ACCOUNT(S) OF DECEASED CUSTOMER OF  
STATE BANK OF INDIA, NEW YORK BRANCH**

STATE OF NEW YORK )

COUNTY OF NEW YORK)            ss

Mr./Mrs./Ms. \_\_\_\_\_, resident of \_\_\_\_\_,

State \_\_\_\_\_ Zip \_\_\_\_\_, being duly sworn, deposes and says:

1. I am the \_\_\_\_\_ of the late \_\_\_\_\_, ("Decedent"). I am fully and personally familiar with all the facts and circumstances stated below.
2. Decedent died a citizen of \_\_\_\_\_, on \_\_\_\_\_. A certified copy of the death certificate is being provided to you herewith.
3. The place of Decedent's death was \_\_\_\_\_.
4. At the time of death, the Decedent's home address was: \_\_\_\_\_  
\_\_\_\_\_
5. To the best of my knowledge, Decedent did not leave a Last Will and Testament, or any similar document with respect to his Estate.
6. There has not been any executor, administrator, fiduciary, or any other representative appointed by any Court, with respect to Decedent's Estate.
7. There are no pending proceedings in any Court for administration of Decedent's Estate.
8. The expenses of Decedent's funeral have/have not been paid. If paid, the amount paid was \$\_\_\_\_\_ and was paid by \_\_\_\_\_. If not paid in full, the amount of \$\_\_\_\_\_ remains owing to \_\_\_\_\_.
9. Decedent had an account(s) at State Bank of India, New York Branch ("SBI"). The account number(s), if known is/are \_\_\_\_\_, and the last known balance on deposit is about \$\_\_\_\_\_.
10. I declare that I am entitled to receive the funds on deposit in that account by virtue of my status as \_\_\_\_\_. If any other persons may be entitled to any part of the funds, I declare that I will distribute the funds properly, to any other persons who may be entitled to receive any part of the funds.

11. Decedent did/did not leave a wife/husband. Decedent did/did not leave a minor child or minor children.

12. To the best of my knowledge, the names and addresses of all persons, if any, who may be entitled to receive any part of the money requested for payment are:

Name	Home Address	Relationship to Decedent	Age
------	--------------	--------------------------	-----

13. No claims or demands by anyone have been asserted with respect to any part of the funds on deposit in Decedent's said account(s) at SBI, New York Branch.

14. I am not aware of any creditors, judgement holders, taxing authorities, or others who may have any claims against the Decedent.

15. I certify that I will be responsible for distributing the money correctly, and I will be accountable to anyone who may have a claim to the money on deposit, or any part thereof. To the best of my knowledge, Decedent never gave SBI a signed letter or other document naming anyone as a beneficiary to receive all or part of the money in the said account(s). Also, to the best of my knowledge, Decedent never did anything else that could legally be considered as naming any beneficiary of the said account(s).

16. I now request you to personally deliver to me at your Branch, or to send me by first class mail any my risk, a check for the amount I am entitled to receive as set forth above, to my permanent home address as follows: \_\_\_\_\_.

17. I, my heirs, successors and assigns, irrevocably and unconditionally agree to indemnify SBI for any and all losses, liabilities, damages, costs, and expenses of any kind, that SBI may incur, as a result of your complying with my request herein. If anyone should sue SBI for any of this money, and/or other alleged damages arising as a result thereof, I will, at SBI's request, and entirely at my expense and risk, defend SBI against the suit. If SBI has to pay any monies by way of judgment or settlement, I will pay that money, and will also reimburse SBI in full for any and all reasonable expenses, including costs, disbursements, reasonable attorneys' fees, etc., which SBI may have incurred in connection with any such suit, claim, proceeding, etc. I agree that this indemnification agreement contained herein, shall be fully enforceable by SBI against me, my heirs, successors, assigns, etc., in the Courts of the State of New York, pursuant to New

York law, and waive any defenses based on lack of jurisdiction, venue, inconvenient forum, etc. I, further, irrevocably waive trial by jury with respect to any issues arising herein, having full knowledge of the consequences of such waiver.

18. My occupation is \_\_\_\_\_

19. The name and address of my employer is \_\_\_\_\_  
\_\_\_\_\_

20. My social security number is \_\_\_\_\_

21. I certify that all the statements, representations, etc. made by me herein, are true and correct to the best of my knowledge and belief. I issue this Affidavit to induce SBI to release payment to me in the absence of Court letters of appointment, of the monies on deposit in the said account(s) of Decedent. I intend SBI to rely on the representations contained herein, and I understand that SBI will, in fact, be reasonably relying thereon, to the fullest extent necessary.

\_\_\_\_\_

STATE OF NEW YORK )  
COUNTY OF NEW YORK ) ss

On the \_\_\_ day of \_\_\_\_\_, before me personally came \_\_\_\_\_  
\_\_\_\_\_ personally known to me, or proved to me on the basis of satisfactory evidence, to be the individual whose name is subscribed to the within instrument, and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

\_\_\_\_\_

Notary Public