

DEPOSIT INSURANCE & CREDIT GUARANTEE CORPORATION
(SECTION 17(1) OF THE DICGC ACT, 1961)

Statement to be submitted by the liquidator showing insured deposits payable by the Corporation -

Name of the insured bank (Under Liquidation) : _____

Claim. No.	Name of the Depositors & full address including names of all the joint account holders	Aggregate amount due to the depositors as on the date of cancellation of the registration of the Bank as an insured bank/ date of liquidation*				Amount of set off, if any**	Net deposits (3-4)	Insured deposits (net deposits or Rs. 1.00 lakh whichever is less)	Amount paid after liquidation of the bank /cancellation- ion of licence, whichever is earlier	Claim amount payable by DICGC (6-7)	Remarks
		Fixed Deposits	Saving Deposits	Other Deposits	Total Deposits						
1	2	3				4	5	6	7	8	9

I hereby certify that (i) to the best of my knowledge the particulars given in the above statement are correct and agree with the books and the bank (in liquidation), and (ii) the claim made in respect of each depositor is in order and that a claim has been preferred in respect of all his / her accounts with the bank and that **more than one claim in respect of his / accounts has not been preferred**(iii) the amount of set off is correctly shown wherever an amount is due to the bank from the depositors before arriving at the amount of claim payable by the Corporation, (iv) all accounts of the point account holders in the “same capacity and same right” have been properly clubbed (v) amount due to the sole proprietary concerns and the amount due to the sole proprietor in his personal capacity have been clubbed together while making the claim.

Full Signature :

Full name of Liquidator :

Date :

Seal :

* The total figure to be shown in the column should represent the total amount due to the depositor in all accounts in the same capacity including interest due to depositors as on the date of cancellation of the registration of the bank as an insured bank.

** The figure to be shown in this column should represent any ascertained sum of money which the insured bank may be legally entitled to claim from the depositor by way of set off against his deposits in the same capacity and in the same right under the bankers right of set off.

Remarks

1. **Annex II** Proforma may be used for – Part “A” Traceable depositors & Part “B” untraceable depositors.
2. It may be ensured that the claim is furnished in the columns prescribed in the proforma only, no existing columns should be deleted from the proforma and no additional columns should be added to it. Any type of deposits other than Fixed Deposits and Saving Deposits are required to be clubbed together and shown under the Head “other Deposits”
3. The details of amounts, if any, paid to the depositors of the bank after the date of cancellation of licence / liquidation of the bank and before submission of claim list may be furnished separately in the following proforma :

Sr. No.	Name of the depositor	Sr.No.in the claim list	Total amount of deposits (Rs.)	Amount paid (Rs.)	Date of payment	Remarks
1	2	3	4	5	6	7