

.....(Name of the company)

**Claim form with Declaration**

**Sri Lanka Deposit Insurance and Liquidity Support Scheme**

Official Identification No: (For office use only)
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Each depositor should submit claim forms including details of joint accounts. Such joint account holders shall submit separate claim forms. For completion of this form please refer the instructions given below.

1. DETAILS OF DEPOSITOR :

- 1.1 Full Name :-.....
- 1.2 Identification Nos: (instructions No. (I) and (IV(a) & (e) given below)
  - a. National Identity Card No./ Business Registration :-.....
  - b. Passport No:- .....c. Driving License No. :.....
- 1.3 Current Address:-.....
- 1.4. Telephone Nos :- Fixed..... Mobile .....
- 1.5 E-mail Address: - .....

2. DETAILS OF DEPOSITOR’S BANK ACCOUNT TO MAKE COMPENSATION :- (instructions No. (IV (c) given below):

- 2.1 Name of the account holder :-.....
- 2.2 Name of the bank:-..... 2.3 Bank account No :-.....
- 2.4 Name of the branch at which the account is maintained: - .....

3. DEPOSIT DETAILS AS AT 05.03.2018 - CIFL or 25.07.2018 - TSCFL (details should be provided separately for each deposit and use separate sheet for additional details) (please read instructions No. (III & IV (b)) given below):

Account Number/ Deposit Certificate No.	Serial No.	Type of Deposit Savings/FD (Individual/Joint)	Amount of Deposit (Rs.)

4. DETAILS OF LOANS OUTSTANDING AS AT 05.03.2018 with CIFL or 25.07.2018 with TSCFL (details should be provided separately for each loan and use separate sheet for additional details) (Please read instructions no. (IV) (d) given below):

- (i) Loan Amount Granted Rs.....(ii) Interest Rate of.....%
- (iii) Term of the Loan .....(iv) Date of the Loan Granted.....
- (v) Instalment Value Rs. ....(vi) Frequency (monthly, semi-annually, annually)
- (vii) Date of the Last Payment .....(viii) Principle/ Capital Outstanding Rs. ....
- (ix) Total Balance Outstanding Rs.....(x) Type of Security.....

5 DECLARATION (Please read instructions no. (II) given below) :-

I,.....(name of the claimant or legal beneficiary) of .....(address of the claimant) state that this claim is made on behalf of .....(name of the depositor) and that no part of said deposit has been paid, that no endorsement or assignment of the same or any part thereof has been given nor do I have any other outstanding loans with the said institution as set out above.

I shall hereby agree to indemnify, hold harmless the Sri Lanka Deposit Insurance and Liquidity Support Scheme (SLDILSS), the Monetary Board of CBSL and any of its employees, officers, representatives and agents from and against any and all claims including but not limited to liabilities, interest, loses, costs, charges, claimed and demanded by any 3rd party, on my deposit/s, upon receipt of payment of compensation made by SLDILSS.

**Signature of the claimant:**

.....

The claimant having read over and understood the contents hereof declared and signed at ..... on this ..... day of .....20.....

Before me

**Signature:**

.....

Commissioner for Oaths/Justice of the Peace

Official Stamp:

Address :

Date:

## **Instructions to fill the Claim Form**

- I. All relevant identification details should be filled considering the followings;
  - a) In the case of individual accounts, National Identity Card (NIC)/Passport/Driving Licence (DL);
  - b) In the case of joint accounts, NIC/Passport/Driving Licence of each joint account holder;
  - c) In the case of minor accounts, NIC/Passport/Driving Licence of guardians and the birth certificate of the minor;
  - d) In the case of sole proprietorship, an unregistered club, society, partnership or any other unincorporated entity, NIC/Passport/ Driving Licence of authorized signatories/partners;
  - e) In the case of a company incorporated under Companies Act, Form 20 (i.e, change of director/secretary or particulars of director/secretary), the Certificate of Incorporation and such other documents as may be required based on the changes of status of the company shall be provided;
  - f) In the case of other registered institutions - under Divisional /Local Government bodies, certificates of registrations from relevant authority shall be provided.
- II. If depositor is submitting his own claim form (including joint account holders) the respective depositor should mention his name under both depositor and claimant or legal beneficiary in declaration section of the claim form.
- III. In the case of fixed deposit, 'Amount of Deposit' should be the last renewed deposit value or if not the face value of the fixed deposit certificate.
- IV. The following documents should be provided with the claim forms;
  - a) Certified copies of all relevant identification documents used to open the deposits at CIFL/TSCFL. (The copies of identification documents should be certified by Attorney at Law/Notary Public/Commissioner for Oaths/Justice of the Peace).
  - b) The amount claimed should be verified by the documentary evidences. Therefore, the claim forms submitted should be supported by,
    - In the case of fixed deposits - all original fixed deposit certificates, latest renewal letters,
    - In the case of savings accounts - all original savings passbooks.
    - In the case of certificate of deposit if any - all original certificate of deposits.
  - c) Depositor's bank account details should be supported by –
    - In the case of savings accounts - a copy of a first page of the savings passbook, which includes the account holder's details.
    - In the case of current account – last statement of account.
  - d) In the case of loans /credit card and any other amount payable by the depositor to CIFL/TSCFL - the latest statements available to prove such due liabilities.
  - e) If name or identification number of the depositor is different as per CIFL/TSCFL deposit certificate/passbook and identification documents (NIC, passport, DL) used to open the account, a legally valid affidavit should be submitted stating the reasons for such differences certified by a Commissioner for Oaths/Justice of the Peace.