

Deceased Estate Claim Form

This form applies when Probate or Letters of Administration are not being applied for. It maybe used for claims up to, but not exceeding the value of \$40,000 with Rabobank.

Please email or post the completed claim form and the required documentation to:

Email: deceased.estates@rabobank.com

Post: Freepost 201424, Rabobank, PO Box 19373, Hamilton 3214

Required documentation			
Certified copy of the Death Certificate	 Certified copy of the Declarant's identification* - this must be posted to the address above 		
Certified copy of the Will (if one exists)	Evidence of the bank account that funds are to be paid to		
*Please refer to the Identity Verification Checklist located, under 'Forms' at: https://www.rabobank.co.nz/help-and-support/forms-and-brochures for acceptable personal identification and address verification requirements.			
Section A: Declarant details			
Full name			
Address Street address			
Suburb	City/Town		
Postcode	Country		
Contact number			
Home Work	Mobile		
Email address			
Section B: Deceased Customer's details			
Full name			
Date of death			
Rabobank bank account numbers held (if known):	:		
If you have more than six accounts that you wish to	to close, please record these on a separate page and attach to this form.		
Section C: Declarant confirmation			
I confirm that: (Please tick as appropriate)			
I am the person named as the Executor in	n the Will of the deceased; or		
To the best of my knowledge the deceased did not leave a Will.			
2. To the best of my knowledge Probate or Letters of Administration have not been applied for or obtained in New Zealand and I will not apply for Probate or Letters of Administration of the Estate of the deceased, and to the best of my knowledge no other person intends to apply for Probate or Letters of Administration of the Estate of the deceased.			



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Section C: Declarant confirmation continued		
3. I claim payment of the money to which the deceased was entitled upon the grounds that I am a: (tick option that applies)		
Named Executor or person entitled to obtain administration Person entitled to the estate of the deceased of the estate of the deceased in New Zealand		
Spouse of the deceased Person related by blood or marriage to the deceased who maintains infant children of that person		
Child of the deceased Person who has custody and control of infant children of the deceased	t	
Section D: Payment details		
I request Rabobank New Zealand Limited to close all Rabobank accounts of the deceased and pay the money to the account of:		
Account name		
Account number Bank Branch number Account number Suffix		
Section E: Declaration and Indemnity		
I, Full name of Declarant , solemnly a	and	
sincerely declare that;		
1. I confirm that I am acting on behalf of the named estate as Executor or Administrator, or that the deceased did not	ī	
leave a Will. 2. All of the information provided in this form is true and correct and forms part of this declaration.		
3. I will apply the funds in accordance with the Will (if the deceased left a Will) and will pay and discharge any debt that		
may be proved in the estate of the deceased. 4. In consideration of Rabobank New Zealand Limited releasing the funds to me, I hereby agree to indemnify Raboba	ank	
New Zealand Limited against any claims, losses, damages, costs and/or expenses whatsoever (including Rabobank New Zealand Limited's legal costs on a solicitor/client basis) which may arise in connection with the release of funds, which Rabobank New Zealand Limited may incur in connection with the release of funds.		
I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declaration 1957.	ns Act	
Declared at City/town in Country		
this day of 20		
Signature of Declarant Full name of Declarant		
Witnessed by: (must be a Solicitor of the High Court of New Zealand or Justice of the Peace in New Zealand)		
Signature of a Solicitor of the High Court of New Zealand or a Justice of the Peace in New Zealand		