#### **DEAF Scheme**, 2014 – Guidelines

#### 1. Crediting the Fund in Electronic form only

It is advised that banks shall remit the amounts due (as defined in the Scheme), in electronic form through portal facility of the E-Kuber (Core Banking Solution) of Reserve Bank of India (RBI), to a designated account created for the Scheme, viz. "DEAF Account 161001006009". All banks are advised to generate a single entry for remitting the amounts to the Fund. Accordingly, the amount required to be transferred to the Fund in terms of paragraphs 3(vi) and 3(vii) of the Scheme, can be credited to the Depositor Education and Awareness Fund (DEAF) Account, specified above, maintained with RBI (within banking hours) on the last working day of the month. Further each bank has been allotted a unique "Bank DEAF Code" by the RBI, for operating the Fund which is given in Annex I of circular DBOD.No.DEAF Cell.BC.114/30.01.002/2013-14 dated May 27, 2014. Every bank remitting amount to the DEAF Account should indicate its unique "Bank DEAF Code".

#### 2. Procedure to be followed by banks for crediting the Fund

- (i) Own Account This facility is available under the service "DEAF Service" of the E-Kuber portal. When a bank is crediting its own amount due to the Fund it should furnish its DEAF code (bank specific DEAF code is given in Annex I of circular mentioned above.) in the "Bank DEAF Code" field and the detailed breakup (number of accounts and amount) of the deposits viz. interest bearing, non-interest bearing deposits and other credits (i.e., any amount other than deposits remaining unclaimed as defined in paragraph 3(iii) of the Scheme), in the fields provided for the same, of the aforementioned service in the portal. Other credits would be non-interest bearing.
- (ii) Members' Account In case of a bank remitting amounts due of member / other banks (banks not having current account with RBI) who approach the bank for remitting such amounts to the Fund, the bank should not consolidate the amounts of all banks, instead they should separately remit the amount due bank-wise, for the amount to be credited to the Fund. In the Bank DEAF Code field available in the DEAF Service of E-Kuber, bank should provide appropriate Bank DEAF Code of the member / other bank, whose funds are being transferred. Also, the detailed breakup (number of accounts and amount) of the deposits viz. interest bearing deposits, non-interest bearing deposits and other credits should be provided in the fields designated for the same. Other credits would be non-interest bearing. Further, it is advised that while making payment towards claims / refunds from the Fund of members / other banks, RBI would credit the account of the sponsor bank from where the credits would flow to the member / other banks.

### 3. Returns prescribed

In terms of paragraph 5 of the Scheme, banks shall, furnish returns duly audited to RBI in the form and manner prescribed. In this regard, all banks are advised to furnish returns duly audited as per details given below:

- (i) Form I Banks shall submit a consolidated return on the date of transferring the amount to the Fund furnishing the total amount credited (indicating separately the amount of interest bearing deposits, non-interest bearing deposits and other credits transferred). For each tranche transferred to the Fund, banks shall maintain complete details viz., name of customer, account number, amount, including interest accrued, transferred to the Fund, date of transfer to the Fund and other related documents, etc. These details / documents shall be maintained by the banks tranche-wise.
- (ii) Form II A monthly return to be submitted by the bank for the total amount of funds transferred to the Fund (indicating interest bearing deposits, noninterest bearing deposits and other credits). The return shall be forwarded by 15th of the succeeding month.

Since there is a considerable overlap between Form I and Form II, it has been decided to club Form I and Form II together in a new form, "Form I & II" as annexed. The periodicity, the last date of submission and all other instructions contained in paragraphs 4 and 5 of the said circular dated May 27, 2014, as applicable to the existing Form II, will be applicable to the new "Form I & II"

- (iii) Form III In terms of paragraph 4 (i) of the Scheme, in case of demand from a customer / depositor whose unclaimed amount / deposit had been transferred to Fund, banks shall repay the customer / depositor, along with interest, if applicable, and lodge a claim for refund from the Fund for an equivalent amount paid to the customer / depositor. In case of any claim for refund of the part amount by the depositor, whose unclaimed amount / inoperative deposit had been transferred to the Fund, the bank shall claim the entire amount transferred to the Fund in respect of such depositor along with interest payable, if any, from the Fund. The details of the refund made by a bank in each calendar month should be furnished in Form III by 15th of the subsequent month. Form III as per should give details i.e., the name of the customer / depositor, date of transfer of the amount to the Fund, date of payment of the amount to the customer, rate of interest claimed from the Fund etc. The return may be forwarded by 15th of the succeeding month to which the claim pertains so as to enable the Reserve Bank to process the same and refund the amount on the last working day of the month. Any return received after 15th of the succeeding month to which the claim pertains, would be processed in the subsequent month.
- (iv) Form IV A monthly consolidated return for claims made by the bank from the Fund may be forwarded by 15th of the succeeding month.
- (v) Form V A yearly return indicating item-wise details of amount due outstanding at the year-end may be submitted within thirty days after the close of each calendar year.

It is advised that banks may necessarily furnish the above returns, even if it is a nil return, to the RBI at the periodicity indicated above.

#### 4. Audit

On the date of transferring the amount to the Fund, the bank should maintain customer-wise details verified by the concurrent auditors, including payment of up-to-date interest accrued, that has been credited to the deposit account till the date of transfer to the Fund, with respect to interest bearing deposits. With respect to non-interest bearing deposits and other credits transferred to the Fund, customer-wise details, duly audited, should be maintained with the bank. The concurrent auditors should also verify and certify that, as per the banks' books, the returns have been correctly compiled by the bank in the monthly and yearly returns submitted to RBI. The above returns shall also be verified by the statutory auditors at the time of annual audit and an Annual Certificate shall be obtained from statutory auditors and forwarded to RBI, certifying that the returns have been correctly compiled by the bank.

### 5. Authorized Signatories

The banks are advised to furnish true copy of the Resolution of the Board of Directors authorising two officials designated as authorized signatories, who would operate the account jointly, for the claims / refund on behalf of the bank from the Fund. The specimen signatures of the authorised signatories may be duly attested by the Chairman, Executive Director or Chief Executive Officer. The specimen signature of the authorized signatories along with Board Resolution may be forwarded as per the Annex IX.

#### 6. Disclosure in Notes to Accounts

All such unclaimed liabilities (where amount due has been transferred to DEAF) may be reflected as "Contingent Liability - Others, items for which the bank is contingently liable" under Schedule 12 of the annual financial statements. Banks are also advised to disclose the amounts transferred to DEAF under the notes to accounts as per the format given below.

|  | (Amounts     | in Rs. crore)    |
|--|--------------|------------------|
|  | Current year | Previous<br>year |
| Opening balance of amounts transferred to DEAF   |              |                  |
| Add: Amounts transferred to DEAF during the year |              |                  |
| Less : Amounts reimbursed by DEAF towards claims |              |                  |
| Closing balance of amounts transferred to DEAF   |              |                  |

The above returns duly certified by the auditors may be forwarded in original, to the Chief General Manager, Reserve Bank of India, Department of Banking Operations & Development, Central Office, DEAF Cell, 12th Floor, Shahid Bhagat Singh Road, Fort, Mumbai - 400001, as also scanned copy in pdf format by email. The statutory auditors' Annual Certificate as mentioned in paragraph 5.6.6 above may also be forwarded at the above address along with a scanned copy in pdf format by e-mail.

#### Form I & II

Monthly Return of unclaimed deposits/credits/ accounts/ in India which have not been operated upon/remaining unclaimed for 10 years or more as on the date of the return and transferred to the DEAF Account. (To be submitted to the Reserve Bank by 15th of the succeeding month)

| Name of the bank                 |  |
|----------------------------------|--|
| Bank DEAF Code allotted by RBI   |  |
| If remitted through sponsor bank |  |
| Name of the Sponsor Bank         |  |
| MonthYear                        |  |
| Date of Transfer to the Fund-    |  |

(Amount in Rupees)

|           | T   |                               |              |                              |        |                                     | nt in Rupees) |                              |        |
|-----------|---|-------------------------------|--------------|------------------------------|--------|-------------------------------------|---------------|------------------------------|--------|
| Sr.<br>No | Particulars   | Interest<br>Deposit           | bearing<br>s | Non-inter<br>bearing D       |        | Other Cre<br>(Non- inte<br>bearing) |               | Total                        |        |
|           |   |                               | (a)          | (                            | (b)    | (c)                                 |               | (d) = (a) + (b) + (c)        |        |
|           |   | Numb<br>er of<br>Accou<br>nts | Amount       | Number<br>of<br>Accoun<br>ts | Amount | Number<br>of<br>Accoun<br>ts        | Amount        | Number<br>of<br>Accoun<br>ts | Amount |
| 1         | Opening balance of accounts transferred to the Fund at the beginning of the month.                      |                               |              |                              |        |                                     |               |                              |        |
| 2         | Accounts, if any, inadvertently omitted in the previous month and transferred during this month.        |                               |              |                              |        |                                     |               |                              |        |
| 3         | Accounts<br>transferred to<br>the Fund<br>during this<br>month. (Other<br>than those<br>reported at 2). |                               |              |                              |        |                                     |               |                              |        |

| 4 | Claims settled                         |  |  |  |  |
|---|--|--|--|--|--|
|   | and refund                             |  |  |  |  |
|   | received from                          |  |  |  |  |
|   | the Fund                               |  |  |  |  |
|   | during this                            |  |  |  |  |
|   | month (only                            |  |  |  |  |
|   | the principal                          |  |  |  |  |
|   | amount to be                           |  |  |  |  |
|   | mentioned).                            |  |  |  |  |
|   |  |  |  |  |  |
| 5 | Net amount                             |  |  |  |  |
|   | transferred to                         |  |  |  |  |
|   | the Fund                               |  |  |  |  |
|   | during the                             |  |  |  |  |
|   | month.                                 |  |  |  |  |
|   | ,, , , , , , , , , , , , , , , , , , , |  |  |  |  |
|   | (2+3-4)                                |  |  |  |  |
| 6 | Total amount                           |  |  |  |  |
|   | with the Fund                          |  |  |  |  |
|   | at the end of                          |  |  |  |  |
|   | the(month)                             |  |  |  |  |
|   | 20(1+5)                                |  |  |  |  |
|   | - ( )                                  |  |  |  |  |

Signature:

Name:

**Designation of Officer (With Stamp):** 

Place: Date:

Certificate- Details given above are true as per the records of the bank and verified by me and found to be correct.

Signature:

Name of Concurrent Auditor (With Stamp):

Address:

#### Form III

Monthly return claiming refund from DEAF (To be submitted along with the claim of refund by 15<sup>th</sup> of the succeeding month to which the claim pertains)

| 1.Name of the Bank:                             | Bank DEAF Code allotted by RBI |                |
|---|--------------------------------|----------------|
| 3. Depositor/Customer wise details of claims ma | during the month 20            | ( Amount In Rs |

| Sr No.                   | Name of<br>Depositor/<br>Customer | the | Type of Account  Whether interest bearing / non Interest bearing Deposits or other credits | Amount originally transferred to DEAF w r t the Depositors/ Customer |     | of<br>to | Amount Paid to Depositor / Customer | Date of payment<br>of amount at (6)<br>to Depositor/<br>Customer<br>dd/mm/yyyy | Difference<br>between<br>refund<br>claimed<br>from Fund<br>and<br>amount<br>transferred<br>to DEAF<br>(6-4) | Rates of interest claimed from the Fund for different periods | Period for which interest paid from the Fund on interest bearing unclaimed deposit transferred to DEAF  No of Years/Months/Days  (Give period corresponding to different rates of interest specified |
|--------------------------|-----------------------------------|-----|--|--|-----|----------|-------------------------------------|--|---|---|--|
| (1)                      | (2)                               |     | (3)  | (4)<br>Total   | (5) |          | (6)                                 | (7)  | (8)   | (9)   | (10)   |
| Number<br>of<br>Accounts |                                   |     |  |  |     |          |                                     |  |   |   |  |

Column 4 amount would be equal to Column 6 amount in respect of Non-interest bearing deposits or other credits transferred to the Fund.

Therefore Column (8), (9) and (10) would be Nil for such accounts.

Note-In case of any claim for refund of part amount by the depositor whose unclaimed amount/inoperative deposit had been transferred to the Fund the bank shall claim the entire amount transferred to the Fund in respect of such depositor along with interest payable, if any, from the Fund

Certified that the above claims have not earlier been made or received from the DEAF Fund.

| Signature: | Signature : |
|------------|-------------|
| Signature. | Signature.  |

Name of the first Signatory: Name of the Second Signatory: **Designation of Officer (With Stamp): Designation of Officer (With Stamp):** 

Date: Place:

Certificate -Details given above are true as per the records of the bank and verified by me and found to be correct.

Signature:

Name of Concurrent Auditor (With Stamp):

Address:

## Form IV Consolidated Return for claims made during the Month

### (To be submitted to the Reserve Bank by 15<sup>th</sup> of the succeeding month)

| Sr | Particulars  |          | Details   |
|----|--|----------|-----------|
| No |  |          |           |
|    |  | No of    | In Rupees |
|    |  | Accounts |           |
| 1  | Name of the Bank   |          |           |
|    | Bank DEAF Code allotted by RBI   |          |           |
| 2  | Details of claim made during the month   |          |           |
|    | <ul> <li>a) Interest bearing Claim</li> <li>(i) From the principal amount transferred to DEAF Account</li> <li>(ii) Interest claimed from the Fund</li> <li>(iii) Gross Claim ( i + ii)</li> </ul> |          |           |
|    | <ul> <li>b) Non-Interest bearing Claim</li> <li>(i) From the Principal amount transferred to<br/>DEAF Account</li> </ul>   |          |           |
| 3  | Total claim from Fund (2.(a) (iii) +2 (b) (i))   | *        | @         |

Certified that the above claims have not been earlier made or received from the DEAF Fund.

Name:
Designation of Officer (With Stamp):
Signature:

Place:

**Certificate-**The consolidated claim made above relates to the depositor/customer as detailed in Form III. Details of the claims are genuine, verified by me and found to be correct.

Signature:

Name of Concurrent Auditor (With Stamp):

Address:

<sup>\*</sup> The total number of accounts should tally with Total of Column Number 1 of Form III.

<sup>@</sup> The amount should also tally with Total of Column 6 of Form III.

### Form V

## Yearly return on the position of unclaimed deposits (Within thirty days from the close of the calendar year) Name of the Bank \_\_\_

| Bank DEAF Code allotted by RBI  |          |             |              |              |  |
|---|----------|-------------|--------------|--------------|--|
|   |          |             |              | t in Rupees) |  |
|   | Previ    | ous year    | Current year |              |  |
|   | Number   | Balance     | Number of    | Balance      |  |
|   | of       | Outstanding | Accounts     | Outstanding  |  |
| Type of Accounts  | Accounts |             |              |              |  |
| Current deposit accounts  |          |             |              |              |  |
| Savings bank deposit accounts   |          |             |              |              |  |
| Fixed or term deposit accounts  |          |             |              |              |  |
| Other deposit accounts in any form or   |          |             |              |              |  |
| with any name   |          |             |              |              |  |
| Credit balance in Cash credit accounts  |          |             |              |              |  |
| Margin Money against issue of Letter of Credit/Guarantee etc. or any Security deposit |          |             |              |              |  |
| Outstanding telegraphic transfers   |          |             |              |              |  |
| Mail transfers  |          |             |              |              |  |
| Demand drafts   |          |             |              |              |  |
| Pay orders  |          |             |              |              |  |
| Bankers cheques   |          |             |              |              |  |
| Sundry deposit accounts   |          |             |              |              |  |
| Vostro accounts   |          |             |              |              |  |
| Inter-bank clearing adjustments credit  |          |             |              |              |  |
| Unadjusted National Electronic Funds  |          |             |              |              |  |
| Transfer (NEFT) credit balances   |          |             |              |              |  |
| Other such transitory accounts credit   |          |             |              |              |  |
| Unreconciled credit balances on account   |          |             |              |              |  |
| of Automated Teller Machine (ATM)   |          |             |              |              |  |
| transactions  |          |             |              |              |  |
| Undrawn balance amounts remaining in  |          |             |              |              |  |
| any prepaid card issued by banks  |          |             |              |              |  |
| Others*   |          |             |              |              |  |
| TOTAL   |          |             |              |              |  |

| *Please specify the details.           | •  |
|--|--|
| Signature:                             |  |
| Name:                                  |  |
| <b>Designation of Officer (With St</b> | amp):  |
| Place:                                 | Date:  |
| Certificate - The above details h      | ave been verified by me and found to be correct. |
| Signature:                             |  |
| Name of Concurrent Auditor             | (With Stamp):                                    |
| Address:                               |  |

## Specimen Signature Card \* Depositor Education and Awareness Fund

# Name of the Bank-----Bank DEAF Code Number-----

| Account Number   |                           |
|--|---------------------------|
| If bank has an Account in DAD, then the same   |                           |
| may be given.  |                           |
| If not, then mention sponsor bank's name and   |                           |
| the Account Number maintained with the Sponsor   |                           |
| bank.  |                           |
| Authorised Officials (Surname)(First Name)   |                           |
|  |                           |
| 1. 2.  |                           |
| Designation  |                           |
|  |                           |
| 1. 2.  | 1                         |
| Specimen Signature of first official   |                           |
|  |                           |
|  |                           |
| 1)   | 2)                        |
|  |                           |
| Specimen Signature of second official  |                           |
|  |                           |
| 1)   | 2)                        |
|  |                           |
| Attested by  |                           |
| Attested by  |                           |
|  |                           |
| Chairman/ Executive Director/ Chief Executive Officer  |                           |
| (Signature with Bank's Seal)   |                           |
| (Signature with Bank 3 Sear)   | Registered Number         |
|  | Registered Number         |
|  |                           |
|  |                           |
| (Address & Telephone Number of Account Holder)   |                           |
| ( The state of the | _                         |
|  |                           |
|  | For RESERVE BANK OF INDIA |
|  | Manager                   |

<sup>\*</sup> All banks are required to submit specimen signature cards of two authorised signatories as the DEAF account would be operated jointly.