[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
The Branch Manager
State Bank of India
[Branch Address]
[City, State, Zip Code]
Subject: Death Claim Application f

Subject: Death Claim Application for Policy No. [Policy Number] Dear Sir/Madam,

I am writing to formally apply for the death claim for the insurance policy held by my [Relation to Deceased, e.g., husband, father], [Deceased's Name], who passed away on [Date of Death]. Policy details:

- Policy Number: [Policy Number]
- Name of the Policyholder: [Deceased's Name]
- Date of Birth: [Date of Birth of Deceased]

Attached to this application, you will find the following documents for your reference:

- 1. Original Death Certificate
- 2. Claim Form (duly filled)
- 3. Policy Document
- 4. Identity Proof of Claimant (self)
- 5. Any other supporting documents

I kindly request you to process the claim at your earliest convenience. Should you require any further information or documentation, please feel free to contact me on [Your Phone Number] or [Your Email Address]. Thank you for your prompt attention to this matter. Sincerely,

[Your Signature]
[Your Name]