



DEPOSIT PROTECTION CORPORATION

CLAIM FOR PAYMENT OF INSURED DEPOSITS (UP TO \$500)

(Complete Part I - III Only)

I (PERSONAL DETAILS)

Name of Closed Bank

Account Number(s)

Name of Account Holder

Account Holder's ID Number

Account Holder's Address

Telephone Number

Email Address

Account Type

Next of Kin: Name & Tel. Number

II (ACCOUNT DETAILS)

1. Total Deposits Claimed \$

2. Insured Amount \$

3. Uninsured Amount \$

(for outstanding balances above \$500, please complete the liquidation claim form)

III PAYMENT INSTRUCTIONS

Please Pay By: (Choose one option)

a) Mobile Money Transfer Ecocash (Registered Number)

b) Direct Credit To My Bank

Bank Name Account Holder's Name

Branch Name..... Account Number

Signature (CLAIMANT) Date

Signature (COMMISSIONER OF OATHS) Date

IV (FOR OFFICIAL USE ONLY)

Claim Verified By : Name Signature Date

Approved for Payment By: Name Signature Date.....

Contact Details:
 Evelyn House
 26 Fife Avenue / Cnr Blakiston Street
 P. O. Box 7390, Harare, ZIMBABWE.

Contact Details:
 Telephone : +263 4 250 900-1 / 252336/460
 Fax: +263 4 252337
 Email : claims@dpcorp.co.zw

Protecting Your Deposits

Once completed, please scan and email to claims@dpcorp.co.zw

CLAIM FORM INSTRUCTIONS

1. If the name of the Claimant in Part I of the Claim Form and the recipient in Part II are the same, you need to submit the Claim Form **only**.
2. The claimant (either an individual or corporate submitting the Claim Form) can instruct Deposit Protection Corporation (DPC) to transfer the funds into another person or corporate bank account. In such a case, the following supporting documents will need to be submitted together with the Claim Form:

a) If the Claimant is an Individual:

- Signed affidavit certified by a Commissioner of Oaths authorizing Deposit Protection Corporation (DPC) to deposit funds into the nominated account.
- A copy of the claimant's identity document (National ID, valid passport or valid driver's licence).
- A copy of the nominated person's identity document (National ID, valid passport or valid driver's licence).

b) If the Claimant is a Company / other institutions:

- **Companies:**
 - the latest CR14 proving the claimant is an authorized/rightful representative of the company.
 - an affidavit signed by Directors authorizing Deposit Protection Corporation (DPC) to deposit funds into the nominated account.
- **Co-operative and Societies:**
 - registration documents showing the members or trustees of the organization.
 - an affidavit signed by trustees authorizing Deposit Protection Corporation (DPC) to deposit funds into the nominated account.
- **Churches and Schools:**
 - documentation proving the claimant is an authorized/rightful representative of the church or school.
 - an affidavit signed by school head or church Pastor/Bishop/Priest authorizing Deposit Protection Corporation (DPC) to deposit funds into the nominated account.
 - A copy of the nominated person's identity document (National ID, valid passport or valid driver's licence)
 - Copies of identification particulars (National ID, valid passport or valid driver's licence) of at least two people who would have signed the affidavit (preferably Chairman and Secretary).

3. Submission Options:

After completing the required information, kindly send the Claim Forms and any supporting documents using any of the following convenient channels:

- **Scan and e-mail to:** claims@dpcorp.co.zw
- **Fax:** +263 4 252 337
- **By Post** - Deposit Protection Corporation, Evelyn House
26 Fife Avenue/Cnr Blakiston Street, P.O. Box 7390, Harare, Zimbabwe.