

Department Of Commerce-Banking Division

P.O. BOX 5795 CHRB SAIPAN, MP 96950 TEL: 670 664-3000

CLAIM APPLICATION FOR DORMANT ACCOUNT (COMPANY/ASSOCIATION/ORGANIZATION)

FOR OFFICIAL USE ONLY: LOG No: B.CAD-C-_____
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Name as it appears on the Account:	Name of Bank:
Address of Account Holder/Business:	Type of Account and Account Number:
TIN number:	Claim Amount:
Contact Number:	
Email Address:	
Two (2) IDs of authorized signatories required. One (1) with the reference number at the initiation of the bank account, e.g., Passport or DL and one (1) with a picture indicating DOB, and one with Social Security Number.	Check applicable box below:
Two (2) forms of authorized signatories' identification	
Copy of Annual Corporation Report	
Copy of Business License	
Copy of Current Tax Records	
An original document from the bank reflecting the actual opening of the account; a certificate of deposit; a receipt of the deposit; a canceled check indicating such deposit; duplicate copy of cashier's check; or any type of document supporting such claim	
If the account is in the name of a Company and signatories are no longer part of the Organization; see DOC regulations requirements	
Signature of the person filing this claim:	Date of claim:
OFFICIAL USE:	
Received by & date of receipt:	Reviewed/approved by & date:
Claim amount to return, (less applicable fees):	Reviewed/Disapprove by/Reson for denial:
Check request by and date:	
Check received by and Date received from DOF:	Check #:
ACKNOWLEDGEMENT:	
Check Released by:	Date:
Check Received by:	Date:

TITLE 20: DEPARTMENT OF COMMERCE

SUBCHAPTER 20-20.4

DORMANT AND INACTIVE ACCOUNTS AND UNCLAIMED FUNDS REGULATIONS

§ 20-20.4-030 Filing a Claim with Commonwealth Government

(a) Within the Three-Year Period, bona fide owner of an account in the Transferred Funds shall file a claim to the Office of Banking Division, Department of Commerce.

(b) Owner shall first fill out a claim form provided by Commerce, to be accompanied by the following documents, as proof of ownership to such account:

(1) Two identification documents:

one with picture, indicating date of birth;

one with referenced number when bank account was opened (passport or driver's license),

one with Social Security number;

(2) An original document from a respective bank reflecting

the actual opening of an account; a certificate of deposit;

a receipt of the deposit;

a canceled check indicating such deposit;

duplicate copy of cashier's check;

or any type of document supporting such claim;

(3) If the account owner is deceased, leaving no will, a court order from a probate court must be submitted, with all pertinent information;

(4) If the account is in the name of a company, an association, or other type of organization, and signatories are no longer part of the organization, such entity shall prove as an Active member of the community, by providing copies of business licenses, current tax records, minutes of meetings, annual corporation reports (non-profit, LLC included), and others as required by the Department of Commerce.

(c) Upon review, the Department of Commerce will request check issuance to the owner of the account, after corresponding fees are deducted from the Transferred Funds.

(d) Checks shall be picked up from the Office of the Banking Division, and shall be acknowledged by the account owner or authorized signatory, not a representative.