

FORM DA 3

Nomination under Section 45-ZA of the Banking Regulation Act, 1949, and rule 2 (1) of the Banking Companies (Nomination) Rules, 1985, in respect of bank deposits.



I/We
*Name(s) _____
Address(es) _____

cancel the nomination made by me/us in favour of
Name(s) _____
Address(es) _____

and hereby nominate the following person to whom in the event of my/our/minor's death the amount of the deposit, particulars whereof are give below may be returned by,

Name and address of Branch /Office in which Deposit is held _____

Deposit
Nature of deposit _____
Distinguishing No. _____
Additional details, if any _____

Nominee
Name _____
Address _____
Relationship with depositor, if any _____
Age _____ If nominee is a minor, date of birth

D	D	M	M	Y	Y	Y	Y
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As the nominee is a minor on this date, I/we appoint Shri / Smt / Kum**
Name _____
Address _____ Age _____
to receive the amount of the deposit on behalf of the nominee, in the event of my / our / minor's death during the minority of the nominee.
Nominee Name to be printed on the Statements/Advices Yes No
Date

D	D	M	M	Y	Y	Y	Y
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 Place _____

Signature(s) / Thumb Impression(s)***

First Depositor	Second Depositor	Third Depositor
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Witness****

Name		
Address		
Signature	 First Witness	 Second Witness

* Nomination facility is available for individual as well as joint deposit accounts with or without "Either or Survivor" mandate.
** Strike out if nominee is not a minor.
*** Where deposit is made in the name of a minor, the variation of nomination should be signed by a person lawfully entitled to act on behalf of the minor.
**** Attestation by two witness is required only for Thumb Impression(s). Signatures need not be witnessed.

Acknowledgement Slip

We acknowledge the receipt of 'Nomination' Form DA3 from
Mr/Mrs/Ms _____
relating to Account No.

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Date

D	D	M	M	Y	Y	Y	Y
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The necessary changes will be carried out in Banks records only for the account mentioned above.

For Shivalik Small Finance Bank