

## Form DA 1

## Nomination under Section 45ZAof the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules, 1985 in respect of Bank Deposits

I	/	V	۷	e	,

1/ ** C,						
Name/s of Acco		Address/es				
hereby nominate the follow	ing person to	whom in the	e event of my	v/our/m	inor's death, the amount of th	
deposit, particulars whereof						
Details of the Account:						
Branch Name	Туре	of the Acco	unt	Account Number (15 digit)		
	SB / CA /	SB / CA / FD / RD /				
		, , ,				
Details of new Nominee						
Name & Address		Relationship with depositor, if any		Age	If nominee is a minor, his date of birth	
* 2. As the nominee is a mine	or on this date	I/We anno	oint Shri/Sm	t/Kum		
			•	•		
the deposit on behalf of the nominee.	nominee, in th				to receive the amount of h during the minority of the	
Place:						
Date:			** Sigr	nature/s /	Thumb Impression/s of	
Dutc			deposi		1 main b mpi cosion/ 5 oi	



## Name/s Signature/s and address/es of witness/es\*\*\*

1. Signature Name Address:	2. Signature Name Address:						
Place: Date:	Place: Date:						
*Strike out if nominee is not a minor  **Where deposit is made in the name of minor, the nomination should be signed by a person lawfully							
entitled to act on behalf of the minor.							
***Thumb impression/s shall be attested by two witnesses.							
	For Office Use Only						
ClerkOfficerRegist	er Folio						
Date:							