

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 given below may be returned by,

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

Deposit

Nature of _____

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 _____ Place _____

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

Signature of First Witness **** Signature of Second Witness ****

Name _____ Name _____

Address _____ Address _____

* 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 _____

For Equitas Small Finance Bank