

**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
---	---	---	---	---	---	---	---

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. 

--	--	--	--

--	--	--	--

--	--	--	--	--	--	--	--

Date \_\_\_\_\_

For Equitas Small Finance Bank