For Equitas Small Finance Bank Limited



Date

Form DA 1

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) | | |
| nominate the following person to whom in the event of my/our/min | or's death the amount of the deposit, partic | culars whereof are given below, may be |
| returned by | | |
| (name and addre | ess of branch/office in which the deposit is I | neld) |
| Deposit | | |
| Nature of | | |
| Distinguishing No. | | |
| Additional details, if any | | |
| Nominee | | |
| Name | | |
| Address | | |
| Relationship with depositor | | |
| Age If nominee is a minor, date of birth DDD N | M M Y Y Y Y | |
| As the nominee is a minor on this date, I/we appoint Shri / Smt / Kri Name | um** | |
| Address | | Age |
| to receive the amount of the deposit on behalf of the nominee, in the | he event of my / our / minor's death during | • |
| Nominee Name to be printed on the Statement/Advice Yes | | • |
| Date | | Place |
| Signature(s) / Thumb Impression(s)*** Depositor | Depositor | Depositor |
| gnature of First Witness**** Signature of Second Witness**** | | |
| Name | Name | |
| | A 11 | |
| * Nomination facility is available for individual as well as joint of Strike out if nominee is not a minor. ** Where deposit is made in the name of a minor, the variation of Attestation by two witnesses is required only for Thumb Impression. | of nomination should be signed by a persor | n lawfully entitled to act on behalf of the minor. |
| Ackno | owledgement Slip | |
| We acknowledge the receipt of 'Nomination' Form DA1 from Mr/Mr | rs/Ms | |
| | relating to Account No | |