

Shree Chhani Nagrik Sahakari Bank Ltd.

Opp. Navapura, CHHANI. (Baroda.)

☎ : 771058, 776100

FORM DA-1

Nomination U/s. 45ZA read with section 56 of the Banking Regulation Act. 1949 and Rule 2(1) of the Co-op. Banks (Nomination) Rules, 1985 in respect of the Bank deposits.

I / We (1) _____

(2) _____

R/o. _____

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

Bank Name : **SHREE CHHANI NAGRIK SAHAKARI BANK LTD. Chhani.**

Nature of deposit	Account No.	Amount of Deposit (Rs.)	Opened on	Due Date	2 Speciman Signature of the Nominee
Name & Address of the Nominee			Relationship with the depositor (s)	Age & Date of birth of Nominee	

As the nominee is a minor on this date, I/We appoint Shri/Smt /Kum. _____

_____ R/o. _____

_____ aged _____

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.

Place : _____

Date : _____

Name(s)

1) _____

2) _____

Witness(es)

Signature(s) 1 _____

Name(s) _____

Address(es) _____

Signature(s) Thumb impression(s)
of depositor(s)

1) _____

2) _____

1) _____

2) _____

Notes :-

1. Where deposit is made in the name of a minor the nomination should be signed by a person lawfully entitled to act on behalf of the minor.
2. Strike out whichever is not applicable.
3. Thumb impression (s) Should be attested by two witnesses.
4. For joint accounts this form should also be signed by all account holders jointly.

OLD NOMINATION CANCELLED & NEW ONE ADMITTED & NOTED

Nom. Reg.
cancellation

Entry No. _____ R.F. _____ Admission Entry No. _____ R.F. _____ Date _____

DEPOSIT

L.F. _____ Clerk _____ Officer _____ Manager _____