

# Rajarshi Shahu Sahakari Bank Ltd. Pune

Prashaskiya Bhavan 1304/1 Shukrawar Peth Bajirao Road Pune -411002

## NOMINATION FORM-DA1

Nomination under section 45 ZA of the Banking Regulation Act, 1949 and Rule 2(1) of Co-operative Banks (Nomination) Rules, 1985 in respect of bank deposits

I/We.....

(Name(s) and address (es)) nominate the following person to whom in the event of my/our/minor's death the amount of the deposit in the account particulars where of are given below, may be returned by RAJARSHI SHAHU SAHAKARI BANK LTD Branch ..... (Name address of branch/office in which deposit is held).

| Nature of deposit         | Account No.                         | Additional details, if any                 |
|---------------------------|-------------------------------------|--|
|                           |                                     |  |
| Name & Address of nominee | Relationship with depositor, if any | Age / Date of birth of Nominee (if minor)* |
|                           |                                     |  |

\* As the nominee is a minor on this date, I/We appoint Shri/Smt. /Kum.:..... (Name, address and age) to receive the amount of the deposit in the account on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee

### **Witness -1**

### **Witness -2**

| Name and address | Name and address |
|------------------|------------------|
|                  |                  |
| Signature        | Signature        |
|                  |                  |
| Place and date   | Place and date   |
|                  |                  |

.....  
\*\*Signature(s)-to be signed by all the joint holders

\*Not applicable if nominee is not a minor

\*\* 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 minor

FOR OFFICE USE ONLY

Nomination Serial No. :-

Date:

Signatures of Bank officials: .....

ACKNOWLEDGEMENT

Name :

Customer ID :

Received Nomination Form DA1 for A/c Nos. ....

Signatures of Bank officials

Date & Receipt Stamp

# Rajarshi Shahu Sahakari Bank Ltd. Pune

Prashaskiya Bhavan 1304/1 Shukrawar Peth Bajirao Road Pune -411002

## NOMINATION CANCELLATION FORM DA2

Cancellation of nomination under section 45ZA of the Banking Regulation Act, 1949 and Rule 2(5) of Co-operative Banks (Nomination) Rules, 1985 in respect of bank deposits

I/We .....  
(Names(s) and address (es)) hereby cancel the nomination made by me/us in favour of  
Shri/Smt/Kum/Mast.....  
(Name and address) in respect of Following deposits.

| Nature of deposit | Account No. | Additional details if any |
|-------------------|-------------|---------------------------|
|                   |             |                           |

.....

\*Signature(s) - to be signed by all joint account holders

\*Where deposit is made in the name of minor, the cancellation of 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.

### **Witness -1**

### **Witness -2**

| Name and address | Name and address |
|------------------|------------------|
|                  |                  |
| Signature        | Signature        |
| Place and date   | Place and date   |

FOR OFFICE USE ONLY

Nomination cancelled Serial No. :-

Date:

Signatures of Bank officials: .....

ACKNOWLEDGEMENT

|        |               |
|--------|---------------|
| Name : | Customer ID : |
|--------|---------------|

Received Nomination Form DA2 for A/c Nos. ....

Signatures of Bank officials

Date & Receipt Stamp

# Rajarshi Shahu Sahakari Bank Ltd. Pune

Prashaskiya Bhavan 1304/1 Shukrawar Peth Bajirao Road Pune -411002

## NOMINATION VARIATION FORM DA3

Variation of nomination under section 45ZA of the Banking Regulation Act, 1949 and Rule 2(2) of Co-operative Banks (Nomination) Rules, 1985 in respect of bank deposits

I/We .....  
(names(s) and address(es)) cancel the nomination made by me/us

in favour of Mr./Mrs.....

(name and address) 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 Rajarshi Shahu Sahakari Bank Ltd.,Branch .....

(Name and address of branch/office in which deposit is held).

| Nature of deposit         | Account No.                         | Additional details, if any                 |
|---------------------------|-------------------------------------|--|
|                           |                                     |  |
| Name & Address of nominee | Relationship with depositor, if any | Age / Date of birth of Nominee (if minor)* |
|                           |                                     |  |

\* As the nominee is a minor on this date,

I/We appoint Shri/Smt./Kum:.....

(Name, address and 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.

### **Witness -1**

### **Witness -2**

| Name and address | Name and address |
|------------------|------------------|
|                  |                  |
| Signature        | Signature        |
| Place and date   | Place and date   |

.....  
\*\*Signature(s)-to be signed by all the joint holders

\*\*Not applicable if nominee is not a minor

\*\* 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 minor

### FOR OFFICE USE ONLY

Nomination Serial No. :-

Date:

Signature(s) of Bank officials: .....

### ACKNOWLEDGEMENT

Name:

Customer ID :

Received Nomination Form DA3 for A/c Nos. ....

Signatures of Bank officials

Date & Receipt Stamp