NOMINATION FORM DA1

DBS Live more, Bank less

Nomination under Sec. 45ZA of the Banking Regulation Act, 1949, and Rule 2(1) of the Banking Companies (Nomination) Rules, 1985, in respect of bank deposit.

I/We _____

_____

[name(s) and address(es)]

nominate the following individual to whom in the event of my/our/minor's death the amount of deposit in the account, particulars

whereof are given below, may be returned by DBS Bank India Limited, _____

(Name of branch where account is held)

Nominee name to be printed on the fixed deposit advise / account statement ☐ Yes   ☐ No

Deposit		
Nature of deposit	Distinguishing No.	Additional details, if any

NOMINEE				
Nominee Name	Nominee Address	Relationship with Depositor, if any	Age	If Nominee is minor his/her DOB

*As the nominee is a minor on this date, I/We appoint Shri/Smt./Kum. (Name) _____ (DOB) _____

(address) _____

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.

Section B

1st Applicant Signature***	2nd Applicant Signature***	3rd Applicant Signature***

Witness 1	Witness 1
Name _____	Name _____
Address _____	Address _____
_____	_____
Signature _____ Date _____	Signature _____ Date _____

* where the deposit is made in the name of a minor the nomination must be signed by a individual lawfully entitled to act on behalf of the minor.   * strike out if not a minor.
*** Thumb impressions must be attested by two witnesses. No witnesses are required incase of signature. **Only one individual can be nominated per account.**
^ While the nomination facility is optional we recommend you avail of the same.

Acknowledgement for Nomination		

DBS Live more, Bank less

We acknowledge the receipt of nomination made by you

Account Holder Name	Nature of the Account	Account Number

Date : ☐D ☐D ☐M ☐M ☐Y ☐Y ☐Y ☐Y

_____
Signature of Bank Official with seal