

# NOMINATION FORM DA1



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 person 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			
Name and Address of nominee	Relationship with depositor, if any	Age	If nominee is a minor, his/her date of birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

As the nominee is a minor on this date, I/We appoint \_\_\_\_\_  
*(to be filled in only if the nominee is a minor)*

*[name(s), address(es) 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

Signature / Thumb Impression\*

1st Applicant Name

Signature / Thumb Impression\*

2nd Applicant Name

Signature / Thumb Impression\*

3rd Applicant Name

Place: \_\_\_\_\_

Date: \_\_\_\_\_

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

Witness 2	
Name _____	_____
Address _____	_____
_____	_____
Signature _____	Date _____

Note - (i) Only one person can be nominated per account.

(ii) 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.

\*Thumb impression must be attested by two witnesses. No witnesses are required in case of signatures.