

Cancellation of Nominations Form

Cancellation of nomination under section 45ZA, of the Banking Regulation Act, 1949 and Rules 2(5) of the Banking Companies (Nomination) Rules, 1985 in respect of the bank deposits.

Name of the Depositor(s) _____

Deposit Account ID _____

Deposit Amount _____

I/We _____ Address (es) _____

_____ hereby cancel the nomination made by me/us in favor of :

Name of the Nominee _____

Address of the Nominee _____

Phone / Mobile No. _____

Email Id (if any) _____

Place: _____

Date: _____

Signature of 1st Applicant

Signature of 2nd Applicant

Signature of 3rd Applicant

Signature of Witness: _____

Name of the witness: _____

Address of Witness: _____

For office use only:

Emp. Name _____ Emp. I.D. _____ Emp. Sign. & Stamp _____