

Nomination form DA1

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

I/We _____

nominate the following person to whom in the event of my/our/minor's death the amount of the deposit in the account, particulars whereof are given below, may be returned by Standard Chartered Bank, _____ branch.

Deposit/ Account:

Nature of deposit _____ Distinguishing No _____

Additional details if any

Nominee:
Name _____ Address _____

Relationship with depositor (if any) _____ Age _____ Date of birth (if nominee is minor) ____/____/____

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

Age _____ 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.

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

Witness(es)***

Name _____

Signature*** _____

Address _____

Witness(es)***

Name _____

Signature*** _____

Address _____

Place : _____

Date : _____

Place : _____

Date : _____

***where deposit is made in the name of a minor the nomination must be signed by a person lawfully entitled to act on behalf of the minor. **Strike out if nominee is not a minor. *** Thumb impression(s) shall be attested by two witnesses.**

Acknowledgement

We acknowledge you Nomination in Form DA1 relating to Account No.

_____ in the name of _____ held

with us. Please quote the Nomination Number _____ in all your correspondence with us in this regard.

For Standard Chartered Bank

Manager