

| NOMINA | TION FORM | | FORM | DA1 | Date : | D | D M M Y Y Y Y | |
|-------------------|---------------------|---------------------------------|-----------------------------|----------------------------|--|-----------------|---|--|
| CUSTO | MER DECLARA | TION | | | | | | |
| respect of the | he bank deposits. | | ing Regulation Act, 1949 a | | | ies (N | omination) Rules 1985 in | |
| | | | | | | | | |
| | | | the event of my / our / m | | | | | |
| given below | , may be returned | ру Співанк, іч | .A. [Branch Name and Addres | | | | | |
| DEPOSI | T DETAILS | | | | | | | |
| Nature of deposit | | Distinguishing No./ Account No. | | Additional details, if any | | | | |
| | | | | | | | | |
| | | | | | | | | |
| NOMINE | E DETAILS | | | | | | | |
| | Name | | Address | | Relationship with Depositor, if any | Age | If nominee is a minor, his/her date of birth | |
| | | | | | | | | |
| | | | | | | | | |
| | minee is a minor on | | e appoint | | | | [Ago] | |
| [Address]_ | ., iiix [itame] | | | | | | [Age] | |
| | | | | | | | | |
| to receive the | | posit on behal | f of the nominee in the eve | ent of my / our | / minor's death durin | g the r | minority of the nominee. | |
| | re(s)/Thumb impress | sion(s) | **Signature(s)/Thum | h imnression(s) | **Signa | ture(s) | /Thumb impression(s) | |
| of Depositor(s) | | | | | Jigila | of Depositor(s) | | |
| WITNESS | S(ES) [#] | | | | | | | |
| Name: Address: | 1 | | | _ | | | | |
| | | | | _ | | | | |
| Signatures: | | | | | | | | |
| | Place | | Date | Place | | | Date | |

^{*} Strike out if nominee is not a minor.

^{**} Where deposit is made / account is held 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(s) shall be attested by two witnesses