



J&K Bank

The Jammu & Kashmir Bank
Corporate Headquarters
M A Road, Srinagar 190 001

Branch _____

Customer Id No.

_____ (Office Use Only)

Account No.

_____ (Office Use Only)

Date _____

Nomination Form DA 1

Nomination under Section 45 ZA of the Banking Regulation Act 1949 and Rule 2(1) of the Banking Companies (Nomination) Rule 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 where of are given below, may be returned by the Jammu & Kashmir Bank Ltd., _____
(Name of branch where account is held)

1. Deposit

Nature of Deposit _____

Account No. _____

Additional details, if any _____

2. Personal Details of Your Nominee

Full Name (IN BLOCK LETTERS) _____

Address with Telephone / Fax Mobile / E-mail Etc.

Pin code _____ City _____

Relationship with Depositor, if any _____ Date of Birth _____

* As the nominee is a minor on this date, I / We appoint _____
Name(s), Address(es) & Age

to receive 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.

3. Personal Details of Your Witnesses

Witness 1

Witness 2

Name _____

Address _____

Signature _____

Place _____

Date _____

** Signature(s) / *** Thumb impression(s) of Depositor(s) _____

* Leave out if nominee is not a minor.

** 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 shall be attested by 2 witnesses.

For Office Use Only

Nomination Serial No _____