

FORM DA 1

Nomination under section 45 ZA read with section 56 of the Banking Regulation Act, 1949 and Rule 2(1) the Co-operative Bank (Nomination) Rules, 1985 in respect of the bank deposits

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 the deposits particulars whereof are given below, may be returned by The Vaish Co-operative Adarsh Bank Ltd. _____
 _____ (Branch, Delhi/New Delhi)

DEPOSIT			NOMINEE				
Nature of	Distinguishing No.	Additional Details, if any	Name	Address	Relationship with depositor	Age	If nominee is a minor, his/her date of birth

** As the nominee is a minor on this date, I / We appoint

Shri/Smt/Km _____ 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 nominee.

Place :

Date :

* Signature(s) Thumb Impression(s)
 of the depositor(s)

Name(s), Signature(s) and Address(es) of Witness(es) H

1. Name _____

Address _____

 Signature

2. Name _____

Address _____

 Signature

 Signature (Manager)

* 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.

** Strike out if nominee is not a minor.