

FORM DA-1 (NOMINATION FORM)

DETAILS OF NOMINATION :

REGISTRATION NO.

Nomination under Section 45ZA of the Banking Regulation Act, 1949 & Rules 1985 in respect of Bank Deposit.

I/Wenominate the following person to whom in the event of my/minor's death the amount of this deposit, particulars of which are given below, may be returned by the Canara Bank , (Name & address of the branch/office in which the deposit is held.)

I/We want the name of the nominee to be printed on the passbook

Details of Deposit :

Type of Deposit : Account Number

Details' of Nominee

Name : Mobile Number of the Nominee

Relationship with the depositor Age..... Years Date of Birth of Nominee (in case of minor)

As the nominee is minor on this date, I appoint Shri/Smt/KumAge Years Address to receive the amount of deposit on behalf of the nominee in the event of my/minor's death during the minority of the nominee.

(Nomination in favour of other than individual is invalid.)

Two boxes for Applicant signatures/Thumb Impressions.

Signature of the First Witness box with fields for Name, Signature, and Address.

Signature of the Second Witness box with fields for Name, Signature, and Address.

(Witnesses are required only in case of applicant is illiterate and if affixing thumb Impression)

Date :

Place :

I/We do not want to nominate any person in this account.

Two boxes for Applicant signatures/Thumb Impressions at the bottom of the form.