

Form DA2

Cancellation of Nomination under Section 45ZA of the Banking Regulation Act, 1949 and Rule 2(5) of the Banking Companies (Nomination) Rules, 1985 in respect of Bank Deposits

I /We [(name(s) and address(es) of Depositor(s)] _____

hereby cancel the nomination made by me / us in favour of (name and address) _____

_____ in respect of Deposit accounts as per details given below

Deposits

| Nature of Deposit | Account No. | Additional details, if any |
|-------------------|-------------|----------------------------|
| | | |

Place: _____

Date: _____

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

1. _____

2. _____

3. _____

** Witness

I

Name : _____ Age : _____

Address : _____

Signature : _____

II

Name : _____ Age : _____

Address : _____

Signature : _____

* Where deposit is made in the name of a minor, the cancellation of 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.