



Sree Manjunatha Credit Co-Operative Society Ltd. (R)

SL No. DRB-3/Regd./01/42157/2019-20

NOMINATION VARIATION FORM-DA 3

Variation of nomination under section 45 ZA of the Banking Regulation Act, 1949 and Rule 2(6) of The Co-operative Banks (Nomination) Rules, 1985 in respect of bank deposits

I/we _____

[Name(s) and Address (es)] cancel the nomination made by us in favour of Mr. / Mrs. / Ms: _____

(Name, address) and hereby nominate the following person to whom in the event of my/our/minor's death the amount of the deposit in the account, particulars where of are given below, may be returned by **Sree Manjunatha Credit Co-Operative Society Limited** (name address of branch/office in which deposit is held).

Nature of deposit	Account No.	Additional details if any	
Name & Address of nominee	Relationship with depositor, if any	Age	Date of birth of Nominee(if minor)*

* As the nominee is a minor on this date, I / we appoint Mr. / Mrs. / Ms: _____

(Name, address and age) to receive the 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

Signature(s) / Thumb Impression (s) of Depositors

1st Account Holder

2nd Account Holder

3rd Account Holder

**Signature(s) –to be signed by all the joint account holders

Place: _____

Date: _____

Witnesses

*Only Thumb impression (s) shall be attested by two witnesses

Name and address – Witness 1	Name and address – Witness 2
Signature:	Signature:
Place and date:	Place and date:

*Not applicable 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 minor

FOR OFFICE USE ONLY

Nomination Serial No: _____ Date: _____ Signature(s) of Bank officials

ACKNOWLEDGEMENT - DA 3

Name: _____ Customer Id: _____ Account Number: _____

We acknowledge receipt of nomination made by you in favour of _____ Age _____ residing at _____

Signature & Date Receipt Stamp