

CALICUT CITY SERVICE CO-OP. BANK LTD. No. D. 2777

[illegible]

19. In the case of Institution - Account operated by :-

a. Name of the 1st Person																			
Designation																			
Phone																			
b. Name of the 2nd Person																			
Designation																			
Phone																			

20. Introduced by

Name:		Signature:	
A/c Type		A/c No.	

21. Nomination

FORM DA 1

Nomination Under Section 45 read with section 56 of the Banking Regulation Act, 1949 2 (1) of the Co-operative Banks (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 death the amount of the deposit, in the account, particulars whereof are given below maybe returned by Calicut City Service Co-operative Bank Ltd.....Branch

Nature	Distinguish No.	Additional details if any	Name	Address	Relationship with depositor, if any	If nominee is a minor his date of birth
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As the nominee is minor on this date, I/We appoint Shri/Smt/Kum.....
.....

(Name, address and age)

to receive the amount of the depositor on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Place :

Date :

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

Sir Please open a Savings /Current / City Kids account in my/our name /firm in the books of the Bank for which I/We agree to comply with and be bound by the Bank's rules for the time being in force for the conduct of such accounts.

(I further declare that the above furnished details are true to the best of my knowledge)

Please issue me a cheque book for operating purpose

I here by remit Rs.....as initial deposit for opening the account.

Place :

Date :

Signature

Documents submitted for the address proof

Office use only

Documents obtained : 1.

2.

Verified Officer