

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) & address(es)]
 hereby cancel the nomination made by me/us in favour of
 (name & address) in respect of
 the following deposit(s).

Deposit		
Nature of Deposit	Account Number	Additional Details if any

Place:

Date: *Signature/#Thumb impression of depositor(s)

#Witnesses	
Name:	Name:
Address:	Address:
Signature:	Signature:
Place: Date:	Place: Date:

Note: *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. #Thumb impression shall be attested by two witnesses.

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ACKNOWLEDGEMENT – DA2

CSB Bank Ltd., branch

We acknowledge receipt of cancellation request for nomination made by you in favour of
 (name of nominee), with respect to your Account No.(s)

Yours faithfully,

Date:

Signature of Bank official with seal