

# Registration Form for Email Statement

Variation of Nomination under Section 45 ZA of the Banking Regulation Act, 1949 and Rule 2(2) of the Banking Companies (Nomination) Rule 1985 in respect of Bank deposits.

I/We \_\_\_\_\_  
\_\_\_\_\_ (name(s) and address(es) cancel the nomination made  
by me / us in favour of Mr./Ms. \_\_\_\_\_  
\_\_\_\_\_ (name and address) and hereby nominate the  
following person to whom in the event of my / our / minor's death the amount of deposit in the account, particulars  
whereof are given, may be returned by Development Credit Bank Ltd., \_\_\_\_\_ (name of branch  
where account 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./Ms. \_\_\_\_\_  
\_\_\_\_\_ (name, address & 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.

### Witnesses:

Name and Address	Name and Address
Signature	Signature
Place and Date:	Place and Date:

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

\* 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 the minor.

FOR OFFICE USE ONLY

Nomination Serial No. \_\_\_\_\_

Date: \_\_\_\_\_

Signature(s) of Bank Officials \_\_\_\_\_

ACKNOWLEDGEMENT

Name	Cust ID
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Received NOMINATION VARIATION Form DA3 for A/c No.(s) \_\_\_\_\_



DCB 24-Hour Customer Care

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Signature & Date Receipt Stamp