



Branch Office.....

Dist. No.....

**FORM DA-1: NOMINATION**

Nomination under Section 45 ZA of Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of Bank Deposits,

I/ We @ Name(s) : \_\_\_\_\_

R/O \_\_\_\_\_  
 Nominate the following person to whom in the event of my/our/ minor's death, the amount of deposit in the account may be returned by Punjab National Bank, B.O. \_\_\_\_\_

DEPOSIT			NOMINEE				
Nature of Account	Account No.	Additional Details, if any	Name	Address	Relationship with depositor, if any	Age	If nominee is minor his/her Date of birth

\* As the nominee is minor on this date, I/we appoint Mr/Ms \_\_\_\_\_

Age \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_ to receive the amount of the deposit 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 depositors**

@Where the deposit is made in the name of minor, the nomination is to be signed by natural/legal guardian of the minor to act on behalf of the minor.

\*Strike out if nominee is not a minor

**WITNESSES**

Name & Signature of the first witnesses	Name & Signature of second witnesses
Name _____	Name _____
Signature: _____	Signature: _____
Address: _____	Address: _____
Place: _____	Place: _____
Date: _____	Date: _____
Telephone No. _____	Telephone No. _____

#Thumb impression(s) shall be attested by two witnesses; otherwise it shall be attested by one witness.

**NOMINATION REGISTERED**

The above mentioned nomination is registered at serial no. \_\_\_\_\_ in respect of (Type of Account.) \_\_\_\_\_ Deposit Account No. \_\_\_\_\_.

Date \_\_\_\_\_.

**For Punjab National Bank**  
 (Authorised Official)  
 (GBPA NO. \_\_\_\_\_ )