

(See Sections 45-ZA, 45-ZC and 45-ZE read with Section 56 of the Banking Regulation Act, 1949 and rules 2 to 4 of the Banking Companies (Nomination) Rules, 2025)

 Date:

D	D	M	M	Y	Y	Y	Y
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Bank Name	Branch	Customer ID/Account No./Locker No.

1. Bank Customer details including deposit/locker:

(*Nomination form is in respect of bank deposit/locker)

Sr. No	*Name of Depositor/ Hirer of a locker	Nature of deposit/ Nature of locker	Distinguishing Number	Additional Details, if any
1				
2				
3				
4				

*Strike out whatever is not relevant

^ The bank may translate this form in a language in which individual signing understand

2. Nomination Details
 Simultaneous Successive

I/We, the undersigned, hereby nominate the following individual(s) to receive the amount of the deposits(s) or the contents of the locker in respect of the particulars above mentioned in the event of my/our death:

Sr. No	Name of Nominee	⁸ Address	⁸ Email/Mobile number, if any.	Relationship with bank customer, if any	Age	Order of priority in case of successive nomination	⁹ Proportion of amount of deposit in percentage in case of bank deposit
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
1						First Nominee	
2						Second Nominee	
3						Third Nominee	
4						Fourth Nominee	

⁸In case of nomination in respect of the locker, this column is to be deleted.

⁹The bank may allow to modify these details in e-nomination from time to time, if required.

Instructions for Bank Customer:

1. You may nominate **more than one individual**, with clearly defined share percentages.
2. You may appoint successive nominees. In case of successive nomination, nomination shall be effective **only in favour of one individual in order of priority** in which their name appears in above table of nomination details. It may be noted that nomination of any nominee lower in the order of nomination shall become effective only after the death of all the nominees whose names are higher in the order of nomination.
3. Nomination is applicable to **all bank accounts/lockers** above unless otherwise specified.
4. This form or the details in this form, as circumstances may admit, can be submitted electronically where the bank enables **e-nomination**.
5. If deposit is made in the name of minor in the name of minor or locker is solely hired in the name of minor, this nomination form should be signed by an individual lawfully entitled to act on behalf of the minor.

Note:

- (i) Simultaneous nomination refers to nomination of one more nominee but not exceeding four, with defined percentage and total amounting to 100%.
- (ii) Successive nomination refers to nomination in favour of one individual in order of priority and is also limited to four nominees; and the nominee lower in the order shall become effective only after the death of the nominee in the higher order.
- (iii) Column (H) above is not applicable in case of nomination in respect of the lockers.
- (iv) In respect of the deposits, out of column (G) and (H), only one column is to be filled.
- (v) Total percentage across all nominees in column (H) must equal 100%.
- (vi) If more than one individual is nominated, the order of priority shall be deemed to be in order in which names appear in column (B)

3. Cancellation of Nomination/Variation of Nomination:

I/We _____, the undersigned, hereby declare that the above nomination is made in supersession of all the previous nominations, if any, made by me/us in respect of the deposit/locker described above. I/We declare that the above nomination has the effect of cancelling previous nominations in respect of the bank deposit/locker.

4. Guardian Details (if any nominee is a minor)

Sr. No	Name of Nominee	Name of Guardian	Relationship with Nominee	Address	Email/Mobile number of guardian
1					
2					
3					
4					

5. Declaration & Signature

I/We declare that the information provided above is true to the best of my/our knowledge and belief. I/We understand that this nomination will supersede any previous nominations for the above-mentioned accounts(s).

Place: _____

Date:

D	M	Y	M	Y	Y	Y	Y
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Name of Depositor(s)

@Signature/E-authentication

*In case of individual who cannot read and /or write, the signature means thumb-impression of such individual, which should be attested by two witnesses.

Witnesses: ***

1. Signature Name: Address: Place: _____ Date: _____	2. Signature Name: Address: Place: _____ Date: _____
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6. Acknowledgement (For Bank Use Only)

Received Nomination Form from: _____

Customer ID: _____

Date of Receipt: ___/___/___

Recorded on CBS / Core Banking System: Yes / No

Reference Number: _____

Name & Designation

Seal & Date:

Signature of Bank Official