

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 ca	ncel the
nomination made by me/us in favour of (name & address)	l		
in respect of (give details of deposit)			
PERSONAL DETAILS OF WITNESS®			
Name:	2		
Address:			
Signature:			
Place:			
Date:			
Date.			
*Signature/Thumb impression of 1st Applicant	*Signature/Thumb impression of 2 nd Applicant	*Signature/Thumb impress of 3 rd Applicant	iion
@Thumb impression(s) shall be attested by two witnesses. *Where deposit is made in the name of a minor, the cancellation	n of nomination should be signed by a person lawfully er	ntitled to act on behalf of the minor.	
ACKNOWLEDGEMENT - DA 2			
Date: D M M Y Y Y Y We acknowledge receipt of cancellation request for non	nination made by you in favour of:		
Name of the Nominee:			
with respect to your A/c. Nos.:		Signature of bank official	Seal