

NOMINATION FORM DA1

Nomination under Section 45ZA of the Banking Regulations Act 1449, and Rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of bank deposits.

I/We _____ nominate the following person to whom in the event of my/our/minor's death the amount of deposit, particulars where of are given below, may be returned by Indusind Bank Ltd. _____ Branch.

Details of Deposit		Nominee				
Nature of Deposit & Distinguishing No.	Additional details, if any	Name	Address	Relationship with Depositor, if any	Age	If nominee is a minor, his/her date of birth

Print Nominee Name# Y N # Depending upon the option selected here, nominee name will get printed / not printed on statements, passbook etc.

#As the nominee is a minor on this date, I/We appoint Shri/Smt/Kum. _____ (name & 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.

*Signature/Thumb impression of the depositor

Place: _____

Date: _____

Witness(es)

Name _____	Name _____
Signature *** _____	Signature *** _____
Address _____	Address _____

* Where deposit is made in the name of a minor, the nomination must be signed by a person lawfully entitled to act on behalf of the minor.

** Strike out if nominee is not a minor.

*** Thumb impression(s) shall be attested by two witnesses.

IndusInd Bank

ACKNOWLEDGMENT

We acknowledge your nomination in form DA1 relating to Account No. _____ in the name of _____ held with us. _____

Ref. No.: _____ Date of Registration _____

Manager _____

Stamp / Seal