



☐ Yes ☐ No

# Nomination (Form DA1)

Nomination under section 452A of the Banking Regulation Act, 1949, and the Rule 2(1) of The Banking Companies (Nomination) Rules, 1985, in respect of bank deposits

I/We \_\_\_\_\_ Address(es) \_\_\_\_\_

nominate the following person to whom in the event of my / our / minor's death the amount of the deposit, particulars whereof are given below, may be returned by **Kotak Mahindra Bank Limited.**

Nature of Deposit \_\_\_\_\_ Distinguishing No. \_\_\_\_\_ Additional details, if any \_\_\_\_\_

Nominee Name  (First Name)  (Middle Name)  (Last Name)

Address \_\_\_\_\_

City  Pin Code  State

Relationship with Depositor, if any \_\_\_\_\_ Age \_\_\_\_\_ if Nominee is a minor, his date of birth

As the Nominee is a minor on this date, I/We appoint Shri/Smt./Kum.\* \_\_\_\_\_ (Guardian Name) Relation with Minor Nominee \_\_\_\_\_

Address \_\_\_\_\_ (Guardian Address)

City  Pin Code  State

Age \_\_\_\_\_ 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.

Nominee name to be printed on the Statements / Advices ☐ Yes ☐ No Date & Place \_\_\_\_\_

Signature(s) / Thumb Impression(s)\*\*\* \_\_\_\_\_ Depositor \_\_\_\_\_ Depositor \_\_\_\_\_ Depositor \_\_\_\_\_

Signature of First Witness\*\*\* \_\_\_\_\_ Signature of Second Witness\*\*\* \_\_\_\_\_

\*Strike out if nominee is not a minor \*\*\*Thumb impression(s) shall be attested by two witnesses.  
**Note :** 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.

## Applicable, if no nomination is provided in a Single Holder A/c

The Bank, through its authorized representative had explained to me the advantages of nomination facility as per the extant guidelines of RBI. However, I hereby decline to presently nominate any individual and understand the risks and consequences of my failure to give nomination and am fully aware of the hardships my legal heirs would face in the event of my death without nomination registered in your Bank records.

Customers Signature \_\_\_\_\_

## FOR BANK USE ONLY

I have clearly explained to the customer the advantages of nomination facility and inspite of the same he/she still does not want to nominate and he/she also refused to provide a specific letter to the effect that he/she does not want to make a nomination

Employees Signature & Code \_\_\_\_\_

DECLARATION: I/We am/are aware that the pre-mature withdrawal of Deposit(s) will require consent and signature of all Depositor(s) irrespective of mode of operation. I/We hereby authorize the Bank that in event of death of anyone of the Depositor(s), the bank on receipt of written request from the surviving Depositor(s), as per the mode of operation, to allow the surviving Depositor(s) to prematurely withdraw the fixed deposit without seeking concurrence from the legal heirs of the deceased depositor(s), if I/We have given a joint mandate for premature withdrawal of deposit by the surviving Depositor(s) at the time of booking the deposit or subsequently. I / We am / are aware that Fixed Deposit booked under 'Premature Withdrawal not allowed' option cannot be withdrawn till maturity. For the Fixed Deposit booked under 'Premature Withdrawal not allowed' option linking of Fixed Deposit to Savings Account, Auto Renewal option and Monthly payout option is not available. I/We further declare and confirm that any modification to the above authorization/mandate shall be only by way of joint instructions by all the applicants/joint holders. I/We am/are aware that penalty charges will be levied for the premature withdrawal of deposits as per the applicable terms and conditions of the bank and I/We have been informed about the applicable penal interest rate for premature withdrawal. The calculation of interest is basis 365 days in a year for deposits booked in a non-leap year and 366 days in a year for deposits booked in a leap (calendar) year. I/We have read & understood the terms and condition governing the opening of an account with Kotak Mahindra Bank Ltd. and those relating to various services including term deposit(s). I/We accept & agree to be bound by the said Terms & Conditions including those excluding/limiting the bank liability. I/We understand that the bank may at its absolute discretion, discontinue any of its services completely or partially without any notice to me/us. I/We agree that the bank may debit my/our account for service charges as applicable from time to time. I/We hereby declare that the information furnished above is true & correct to the best of knowledge. Above declaration is not applicable where account is maintained with mode of operation as "Jointly".

Signature (1st Applicant)

Signature (2nd Applicant)

Signature (3rd Applicant)

Name

Name

Name

## FOR BANK USE - BRANCH

Source Code  Value Date  Created by \_\_\_\_\_ Opty ID   
Lead Generator Code  Sourcing Dt  Checked by \_\_\_\_\_ PAN  Form 60 ☐ KMBL Staff ☐  
Lead Convertor Code  Individual ☐ Non-Individual ☐ Authorised by \_\_\_\_\_ Scheme Code:  Branch Code:

## FOR BANK USE - CPC

V-Date   
(Intentionally left blank)

### OTHER DETAILS

Tran. ID   
Tran Srl.No

### FOR CORPORATES ONLY

App 2 ☐ F ☐ NF  
App 3 ☐ F ☐ NF

Tenure  M  D Amount (Rs.)  15G/15H Attached ☐ Yes ☐ No Relation  For Individuals (MOP=OTHERS) A/C No.

Period  years(s)  month(s)  day(s) Effective Date of Deposit  Rate of Interest \_\_\_\_\_

Nomination Received ☐ Yes ☐ No Received the Nomination Form (DA-1) with the following details Nominee: \_\_\_\_\_

Received \_\_\_\_\_ Officer Signature \_\_\_\_\_ Bank Seal