

Nomination Details (Form DA 1)

Nomination u/s 45 ZA read with section 56 of the Banking Regulation Act1949 and Rule 2(1) of the Co-operative Banks (Nomination) Rules 1985, in respect of the Bank deposits.

Nomination is mandatory as per RBI guidelines

I/We _____ nominate the following person/s to whom in the event of my / our death the amount of deposit in the above account, may be returned by NKGSB Bank Ltd. _____ Branch

Name & address of nominee	Relationship with depositor	Age	* DOB of nominee if minor
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* As the Nominee is minor on this date, I/We appoint _____ Guardian's Name _____, _____ Guardian's address _____, _____ PIN Code _____ State _____ to receive the amount of the deposit in the account on behalf of the nominee in the event of my/our/ minor's death during the minority of the nominee.

I/We do not wish to make nomination

Date _____

****Signature/s or #thumb impression of depositor/s**

Witness

Name _____ Address _____
 _____ PIN Code _____ State _____

**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. # Only thum impression should be attested by witness.

Sign _____

INTRODUCTION DETAILS :

Introducer's Name _____ Cust. No. : _____

Branch : _____ Account No : _____

I know the applicant/s for the last _____ months / years. I confirm the Identity, Occupation and Address of the applicant/s

Date : _____

Introducer's Signature: _____

Signature verified by : _____
 Branch attestation

Debit Card Declaration

I have read and understood the terms and conditions applicable for Debit Card. I accept and agree to be bound by the said Terms and Conditions including those excluding/limiting the Bank's liability. I understand that the Bank may, at its absolute discretion, discontinue any of the service completely or partially without any notice to me. I agree that the Bank may debit my account towards service charges as applicable for time to time.

General Banking Declaration

I/We have read the terms and conditions of the Bank pertaining to the accounts and add-on services such as SMS Banking, Tele Banking, Internet Banking and Mobile Banking. I/We have understood the same and agree to abide by such/any other terms and conditions that may be in force from time to time. I/We have also read the Bank's 'Schedule of charges' for the respective and agree to abide by the same. I/We have also understood that terms & conditions and the service charges are subject to change without any prior notice. The information furnished/declaration given by me/us in this form is true and I/We shall be held responsible for the same at all times. For the purpose of providing certain services, the bank is/may be required to engage the services of specialized and the other service providers/agents. I/We agree that the bank may/would be required to furnish any information regarding my/our account to these service providers/agents. I/We also understand that the continuation of the accounts is at the Bank's sole discretion, and in case of dissatisfaction with the conduct of the account, the bank has right to close the account after giving suitable notice or withdraw some/all services/concessions granted to me/us.

We confirm that all the Terms and Conditions and charge schedule for the Scheme code _____ is explained to us in detail and accepted by us.

Account conversion (For Salary Savings Accounts) : If the salary is not credited for a period of 3 months in to my salary account, the account will be automatically converted in to a normal savings account and all the charges will be applicable as per normal saving account.

I / We would like to receive information over SMS or Email about bank's new product launches and promotions.

I/We authorise the Bank to disclose from time to time any information relating to my account to any parent/ subsidiary, affiliate and associate of NKGSB Co operative Bank Ltd., and/or to third parties engaged by the Bank and/or financial institutions under regulatory guidelines for activities related services of accounts.'

I/We hereby declare that the information and declaration/s furnished above is/are true and correct to the best of my/our knowledge.

Signatures : These signatures will be considered as specimen signature for all account related activities.

 1st Holder

1st Holder

 1st Holder Name

 2nd Holder

2nd Holder

 2nd Holder Name

 3rd Holder

3rd Holder

 3rd Holder Name

 4th Holder

4th Holder

 4th Holder Name

For Branch use : All signatures are done in presence of Branch Official.

Checked by _____

Authorised by _____

(Name and Signature of the Branch Official alongwith Employee Code)

(Name and Signature of the Branch Incharge alongwith Employee Code, Branch Seal/Stamp)