

THE INCOME TAX DEPARTMENT CO-OP BANK LIMITED, MUMBAI

HEAD OFFICE : AAYAKAR BHAVAN, GROUND FLOOR, ROOM NO. 33,
MAHARSHI KARVE ROAD, MUMBAI - 400 020.

Nomination under section 45 ZA read with section 56 of the Banking Regulation Act, 1949 and Rule 2(1) of the Co-operative Bank (Nomination) Rules, 1985 in respect of the Bank deposits

I/We _____

[Names (s) and address (es)]

Saving Account No.:- _____

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 The Manager, THE INCOME TAX DEPARTMENT CO-OP. BANK LIMITED, MUMBAI.

Nature	Distin- guishing No.	Deposit	Name and Address	Nominees	Age	If nominee is a minor, his date of birth
		Additional details if any		Relationship with depo- sitor, if any		

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

[Name, Address and Age]

to receive the amount of the deposit behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Place :

Date :

+ Signature(s)/Thumb impression(s)
of depositor(s)

Name(s), Signature(s) and
Address(es) of witness(es)*

+ 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.

Strike out if nominee is not a minor.

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