



JANAKALYAN SAHAKARI BANK LTD.

Deposit Account

Form DA-2 - Nominee Cancellation

NAME OF DEPOSITORS

Cancellation of nomination under Section 45 ZA - Section 56 of the Banking Regulation Act 1949 and Rule 2(5) of the Co-operative Banks (Nomination) Rule 1985 in respect of Bank deposits.

I / We

Name / s	Address / es

hereby cancel the nomination made by me/us in favour of _____

_____ in respect of

(Name and Address).

Deposit

Nature of Deposit	Account No.	Additional details, if any

Depositors Signature

**Signature(s) /
***Thumb impression(s) of Depositor(s)

Personal Details of Your Witnesses

Name 1) _____ 2) _____
Address _____

Witnesses Signature

Signature _____
Place : _____
Date : _____

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

@ Thumb impression(s) shall be attested by 2 witnesses.

Witness is not required when the nomination forms are signed by the depositor.



JANAKALYAN SAHAKARI BANK LTD.

Acknowledgement DA 2

Date : _____

We acknowledge receipt of cancellation request for nomination made by you in favour of :

Name of the nominee _____ Age : _____ years.

with respect to your A/c. nos. _____

Yours faithfully,

Signature of bank official