



Date	DD / MM / YYYY	Branch	Request Type	<input type="checkbox"/> New <input type="checkbox"/> Change of Nominee
Sr.No.	Nature of Deposit (SB/Current/FD/RD/BDD)	Account Number (15 digits)		

I/We, the applicant(s) for this account, nominate the following person to whom, in the event of my/our/minor's death, the credit balance in the account may be paid by Bharat Co-operative Bank (Mumbai) Ltd.

PHOTOGRAPH of the nominee (Preferred)	NAME, AGE & ADDRESS OF THE NOMINEE	
	Name:	
	Address:	
	Date of Birth of Nominee:	Age:
	Relationship with depositor:	

Existing CIF (customer ID) of the Nominee if any: _____

IF THE NOMINEE IS A MINOR, Date of Birth of Minor Nominee: ____/____/____ (DD/MM/YYYY)

As the nominee is a minor on this date, I / We appoint _____ related to the minor as _____ and residing at _____ 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 of the 1 st /Sole Applicant	_____ Signature of the 2 nd Applicant	_____ Signature of the 3 rd Applicant
Name: _____	Name: _____	Name: _____

- Nomination can be done in favour of one person only and only in favour of individuals.
- Thumb-impression(s) of the accountholder shall be attested by two witnesses. Please submit ID & Address proofs of witnesses.
- Nomination form should be signed by all the joint account holders.
- Nomination is available for accounts opened in individual capacity (i.e. single / joint accounts as well as accounts of a sole proprietary concern).
- In the case of a joint deposit account, the nominee's right arises only after the death of all the depositors.
- Nomination can be made in favour of a minor also. During the period if the minor does not attain majority, the natural guardian will receive the amount on the minor's behalf.
- Please submit DA-2 form for nominee deletion, if nominee exists for above mentioned account(s).

For Office Use Only

_____ Signature of Branch Official	Emp. No.	_____ Signature of CPD Official	Emp. No.
Date		Date	
Name of the Branch Official: _____		Name of the CPD Official: _____	

Customer Acknowledgement - Nomination

Received request for addition of Nomination from _____ in the account(s): _____

Date: _____

Signature of Bank Official
Staff No. _____

