

**Form DA 1**  
**Nomination under Section 45ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the**  
**Banking Companies (Nomination) Rules, 1985 in respect of Bank Deposits**

I / We

Name/s	Address/es

nominate the following person to whom in the event of my/our/minor's death, the deposit in the account(s), particulars whereof are given below, may be returned by Axis Bank Ltd., \_\_\_\_\_ Branch.

**Details of the Account**

Nature of the Account	Account Number	Additional Details, if any

**Nominee:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship with depositor (if any)  Age   Years

Print Nominee Name#  Y  N \*Depending upon the option selected here, nominee name will get printed / not printed on statements, passbooks, etc.

If nominee is minor his/her date of birth

\*As the nominee is a minor on this date I/we appoint

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship with minor\*:  Age   Years

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

Witnesses: \*\*\*

1. Signature  Name:  Address:  Place: <span style="float: right;">Date:</span>	2. Signature  Name:  Address:  Place: <span style="float: right;">Date:</span>
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\*Strike out if nominee is a not a minor.

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

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