



**CHANGE OF NOMINATION FORM**

**FORM DA3**

Date :

**CUSTOMER DECLARATION**

Variation of the Nomination under Section 45ZA, of the Banking Regulation Act, 1949 and Rule 2(6) of the Banking Companies (Nomination) Rules, 1985 in respect of the bank deposits.

I/We [Name(s)] \_\_\_\_\_

[Address(es)] \_\_\_\_\_

cancel the nomination made by me/us in favour of [Name] \_\_\_\_\_

[Address] \_\_\_\_\_

\_\_\_\_\_ and hereby 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 Citibank, N.A. [Branch Name and Address] \_\_\_\_\_

**DEPOSIT DETAILS**

Nature of deposit	Distinguishing No./ Account No.	Additional details, if any

Version 1.3

**NOMINEE DETAILS**

Name	Address	Relationship with Depositor, if any	Age	If nominee is a minor, his/her date of birth
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\*As the nominee is a minor on this date I/we appoint :

Mr./Ms./Mrs./Mx. [Name] \_\_\_\_\_ [Age] \_\_\_\_\_

[Address] \_\_\_\_\_

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)**

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

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of Depositor(s)

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of Depositor(s)

**WITNESS(ES) #**

Name: 1. \_\_\_\_\_ 2. \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Signatures: \_\_\_\_\_

Place \_\_\_\_\_ Date \_\_\_\_\_

Place \_\_\_\_\_ Date \_\_\_\_\_

\* Strike out if nominee is not a minor

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

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

The form should be signed only after all details are completely filled