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CANCELLATION OF NOMINATION FORM FORM DA2

Date :

CUSTOMER DECLARATION

Cancellation of nomination under Section 45ZA, of the Banking Regulation Act, 1949 and Rule 2(5) of the Banking Companies (Nomination) Rules, 1985 in respect of the bank deposits.

I/We [Name(s)] _____

[Address(es)] _____

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

[Address] _____

in respect of:

DEPOSIT DETAILS

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

SIGNATURE(S)

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

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

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

WITNESS(ES)[#]

Name: 1. _____ 2. _____

Address: _____

Signatures: _____
Place _____ Date _____

** 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