SURYODAY SMALL FINANCE BANK LIMITED

Form DA 3

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

I / We

Name/s	Address/es	

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

A BANK OF SMILES

Name & Address	Relationship with depositor, if any	Age

and hereby nominate the following person to whom in the event of my/our/minor's death, the amount of deposit, particulars whereof are given below, may be returned by

Deposits

Nature of the Account	Distinguishing No.	Additional Details, if any
Nominee:		
Name:		
Address:		
Relationship with depositor (if any)		Age Years
Print Nominee Name# Y Dependit	ng 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 \Box	D M M Y Y Y Y	
*As the nominee is a minor on this date I/v	ve appoint	
Name:		
Address:		
Relationship with minor*:		Age Years
		ny/our/ minor's death during the minority of
the nominee.		

Witnesses: ***

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

1. Signature		2. Signature	
Name:		Name:	
Address:		Address:	
Place:	Date:	Place:	Date:

*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.