

**Form DA1 NOMINEE ADDITION FORM**

We understand your world

Nomination	Nomination under sections 45 ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nominations) Rule 1985 in respect to bank deposits. I/We, , ODAKKARA KODALIKARUPPUR, ARIYALUR, ., TAMIL NADU, 612902. Name(s) and address(es) nominate the following person to whom in the event of my / our / minor's death the amount of deposit in the account, particulars whereof are given below, may be returned by HDFC Bank Ltd., S G ROAD (Name of branch where account is held)											
	<table border="1"><tr><td>Nature of Deposit</td><td>Account No.</td><td>Additional Details,if any</td></tr><tr><td></td><td>50100461504301</td><td></td></tr></table>			Nature of Deposit	Account No.	Additional Details,if any		50100461504301				
Nature of Deposit	Account No.	Additional Details,if any										
	50100461504301											
Personal Details of Your Nominee	<table border="1"><tr><td>Name, Address and Contact no. of Nominee (USE CAPITAL LETTER ONLY)</td><td>Relationship with Depositor, if any</td><td>Age</td><td>Date of Birth of Nominee</td></tr><tr><td>E AAKASK 801 C BLOCK MOVIE TOWERS, KOKAPET HYDERABAD, TELANGANA, INDIA, 500075.</td><td>BROTHER</td><td>26</td><td>9/11/1999</td></tr></table>				Name, Address and Contact no. of Nominee (USE CAPITAL LETTER ONLY)	Relationship with Depositor, if any	Age	Date of Birth of Nominee	E AAKASK 801 C BLOCK MOVIE TOWERS, KOKAPET HYDERABAD, TELANGANA, INDIA, 500075.	BROTHER	26	9/11/1999
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<p>*As the nominee is a minor on this date, I / we appoint _____ to receive the amount of the deposit in the Account on behalf of the nominee in the event of my / our/ minor's death during the minority of the nominee.</p>												
Personal Details and Signature of Your Witnesses	Name : 1) _____ 2) _____ Address : _____ Signature : _____ Place : _____ Date : _____ _____ **Signature/***/Thumb impression of 1st Applicant **Signature/***/Thumb impression of 2nd Applicant **Signature/***/Thumb impression of 3rd Applicant											
	<p>* Leave out if nominee is not a minor. ** Where deposit is made in the name of minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor. *** Thumb impression shall be attested by two witnesses.</p>											
For Bank use only	Nomination Serial No.: _____											

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ACKNOWLEDGEMENT - DA1

Date : _____

We acknowledge receipt of request for change in nomination made by you in favour of :

Name of the nominee _____ Age: _____ years.

with respect to your A/c. nos. _____

Yours faithfully,

Signature of Bank official with seal