



कुमारी बैंक लिमिटेड
KUMARI BANK LIMITED

DEPOSITOR'S NOMINATION FORM
(TO BE FILLED BY INDIVIDUAL DEPOSITORS ONLY)

Dear sirs,

I, maintaining Current/Savings/Term Deposit Account
No. with your Bank hereby give details of the nominee(S) to receive any
sums of amount which may be due to me from Bank in the event of my death.

Mr./Mrs./Miss
Son/Wife/Daughter of
Date of Birth Age
Relationship
Permanent Address
Contact Address
..... Tel. No.

and in the event of the death of above nominee(s).

I appoint the following alternate nominee(s).

Mr./Mrs./Miss
Son/Wife/Daughter of
Date of Birth Age
Relationship
Permanent Address
Contact Address
Tel. No.

Signature

A/C No.

Witness:

1. Signature
Name
Address

2. Signature
Name
Address