



# Janata Sahakari Bank Ltd., Pune (Multistate Scheduled Bank)

Depository Cell - DPID : IN 300280

**CDSL**

Bharat Bhavan, 1360, Shukrawar Peth, Behind Saraswati Prashala, Bajirao Road, Pune - 411 002.

Phone : 020 - 24431014 / 15 / 16, 24521181 to 85 E-mail : depository@janatabankpune.com

## NOMINATION FORM

To,  
Janata Sahakari Bank Ltd., Pune  
Depository Cell  
1360, Shukrawar Peth, Bajirao Road, Pune 411002.

Date																			
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Dear Sir / Madam,

I / We the sole holder / Joint holders / Guardian (in case of minor) hereby declare that :

I / We do not wish to nominate any one for this demat account.

[Strike out what is not applicable] [Signatures of all account holders should be obtained on this form]

I / We nominate the following person/s who is/are entitled to receive security balance lying in my / our account, particulars whereof are given below, in the event of the death of the Sole holders or the death of all the Joint Holders.

BO Account Details																			
DP ID	1	3	0	1	4	2	0	0	Client ID										
Name of the First / Sole Holder																			
Name of the Second Holder																			
Name of the Third Holder																			

Nomination Details	Nominee 1	Nominee 2	Nominee 3
*First Name			
Middle name			
*Last Name			
*Address			
*City			
*State			
*PIN Code			
*Country			
Tel/Mobile No. :			
Fax No.			
PAN No.			
UID			
Email ID			
*Relationship with the BO			
Date of Birth (Mandatory if Nominee is a minor)			

<b>Nomination Details</b>	<b>Nominee 1</b>	<b>Nominee 2</b>	<b>Nominee 3</b>
Name of the Guardian of Nominee (if nominee is a Minor)			
<b>*First Name</b>			
<b>Middle Name</b>			
<b>*Last Name</b>			
*Address of the guardian of nominee			
*City			
*State			
*Country			
*PIN Code			
Age			
Tel/Mobile No. :			
Fax No.			
Email ID			
*Relationship of the Guardian with the nominee			
<b>*Percentage of allocation of securities</b>			
<b>*Residual Securities [please tick any one Nominee If tick not marked default will be first nominee]</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Note :** Residual securities : incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, in any.

**\* Marked is Mandatory field**

This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us.

**Place :** .....

**Date :** .....

	<b>First / Sole Holder or Guardian (in case of Minor)</b>	<b>Second Holder</b>	<b>Third Holder</b>
Name			
Signature			

**Note :** One witnesses shall attest signature(s) / thumb impression(s)

**Details of the Witness**

Details of the Witness	First Witness
Name of witness	
Address of witness	
Signature of witness	

**(To be filled by DP)**

Nomination Form accepted and registered wide Registration No. ....

Date : .....

**For Depository Participant**  
(Authorised Signatory)

**Acknowledgement Receipt**

Received nomination from :

DP ID	1	3	0	1	4	2	0	0	Client ID									
Name																		
Address																		
Nomination in favor of First Nominee																		
Second Nominee																		
Third Nominee																		
No Nomination	<input type="checkbox"/> <u>Does not wish to nominate</u>																	
Registration No.										Registered on								