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Please provide this number for future reference	(Bank Copy) , read, understood and agree the Terms & Conditions)) Alert Service I) Fixed Deposits / Recurning Deposits, hone Banking access, if applied for, is applicable to all and may debit my / our account for service charges as as in force, enacted / issued by Statutory or Regulatory ove details and information given by me /us. I / We do hdebits in my account. I / We understand that it is my / consecutive 4 months, the Bank deserves the right to a date of change of the status. dby holder(s) at the time of creation of Deposit or any positor(s) to prematurely withdraw the Fixed Deposit re that any action of the Bank based in the above shall posits as per the applicable Terms & conditions of the containing the Statement as an attachment to my/our ts at quarterly intervals, l/we need to provide a specific f / themselves liable to be proceeded against with for	the applicable AQB/AMB for the same is erly intervals or as prescribed by Reserve Bank of Bank reserves the right to decline/reverse such ration and read all terms and conditions of dbelow. roup companies/associates or agents through ted as my/our consent/acceptance. (If you do not	involve, and is not designed for the purpose of any contravention of the provisions of the aforesaid We have complied and shall continue to comply with the aforesaid Act and the rules/regulations/di	dule hereunder and the opening of a demat account-NRI (Repatriable/ Non Repatriable) / remittances does not Act or of any rule, regulation, notification, direction or order made there under from time to time. irections thereunder. you about the accounts/transaction in terms of above declaration. ctory compliance therewith, the Bank shall refuse in writing to undertake the transaction and shall if it has leserve Bank of India. I/We further declare that the undersigned has the authority to give this declaration and

nominate the following person to whom in th	an avant of mulaur/minor's doath th	a amount of the dans	scit particulars w	horoof are give	n halaw m	ou ho roturn	ad by Katak Mal	hindra Pank Limited	
Nature of Deposit	le event of my/our/minor's death th	Distinguishing No				details, if any			
					Auditional		(
Nominee Name Title (First Name)	(Mi	ddle Name)		(Last Name)			Upto 40 cl	naracters (pnly)	
Nominee Address :									
*City	*Pin Code		State						
Relationship with depositor, if any		Age	If nor	minee is a min	or, his/her d	late of birth	DDM	M Y Y Y Y	r
As the nominee is a minor on this date, I/We	appoint Shri / Smt / Kum*	(Guard a	in Name)		Relation w	vith Minor No	ominee		
Address:									
*City	*Pin Code		State						
to receive the amount of the deposit on beha		nv / our / minor's deat		prity of the nor	ninee.				
Nominee Name to be printed on the Stateme		No		,					
Signature(s) / Thumb Impression(s)***		_	Depositor			Depositor		Deposit	tor
			Depositor			Depositor		Deposi	
Date & Place		Sig	nature of First Wi	tness***			Signature of Se	econd Witness***	
* Strike out if nominee is not a minor *** Thumb in Note: Where deposit is made in the name of a minor			ly entitled to act on	behalf of the min	ior		5		
Applicable, if no nomination is provided in a The Bank, through its authorized representative had	-	nation facility as ner the	FOR BANK USE		omer the adva	intages of nomi	nation facility and i	inspite of the same he/sl	ne still d
extant guidelines of RBI. However, I hereby decline to consequences of my failure to give nomination and	presently nominate any individual and u	inderstand the risks and		nate and he/she				effect that he/she does r	
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