

Internal


SURYODAY
 A BANK OF SMILES

SURYODAY SMALL FINANCE BANK LIMITED
Form DA-1 FOR ADDITION OF NOMINATION

Nomination under Section Sections 45-ZA, 45-ZC and 45-ZE read with Section 56 of the Banking Regulation Act, 1949 and rules 2 to 4 of the Banking Companies (Nomination) Rules, 2025

I/We

Name/s	Address/es

nominate the following person to whom in the event of my/our/minor's death, the deposit in the account/s, particulars whereof are given below, may be returned by Suryoday Small Finance Bank Limited, _____ Branch.

Details of the Account

Nature of the Account	Account Number	Additional Details, if any

Nominee:

Serial Number	First Nominee	Second Nominee	Third Nominee	Fourth Nominee
Name of the Nominee				
Nominee (s) Address	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____
	Pin/ZIP code_____	Pin/ZIP code_____	Pin/ZIP code_____	Pin/ZIP code_____
Relationship with Depositor, if any				
Nominee's Age	Age	Age	Age	Age
*Nominee DOB (If Nominee is Minor)	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
*Name of Guardian				
*Relationship with Minor Age of Guardian				
<input type="checkbox"/> Successive Nomination - Order of priority #	First Nominee	Second Nominee	Third Nominee	Fourth Nominee

First nominee shall receive the entire amount of the deposits(s) in the event of my death. And in the event of death of First Nominee before my death or after my death without receiving any of or all the amounts of deposits, I hereby nominate my Second Nominee (named hereinabove). And in the event of death of the First and Second Nominee before my death or after my death without receiving any of or all the amount as of the deposit(s) as the case may be, I hereby nominate Third Nominee (Named hereinabove) as the person to receive the entire amount of the deposits(s). And in the event of death of the First, Second and Third Nominee before my death or after my death without receiving any of or all the amount as of the deposit(s) as the case may be, I hereby nominate Forth Nominee (Named hereinabove) as the person to receive the entire amount of the deposits(s).

OR

<input type="checkbox"/> percentage in case of bank deposit.	Percentage ____%	Percentage ____%	percentage ____%	Percentage ____%
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