

Internal



SURYODAY
A BANK OF SMILES

SURYODAY SMALL FINANCE BANK LIMITED

FORM DA-3 FOR MODIFICATION 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

hereby declare that the below nomination is made in supersession of all the previous nominations made by me/us in respect of the deposit described below. I/We declare that the given nomination has the effect of cancelling previous nominations in respect of the bank deposit.

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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Note:

- Simultaneous nomination refers to nomination of one more nominee but not exceeding four, with defined percentage and total amounting to 100%.
- Successive nomination refers to nomination in favor of one individual in order of priority and is also limited to four nominees; and the nominee lower in the order shall become effective only after the death of the nominee in the higher order.
- Total percentage across all nominees in row (I) must equal 100%.
- If more than one individual is nominated, the order of priority shall be deemed to be in order in which names appear
- Joint holder cannot be added as nominee
- The guardian of the nominee cannot act as the nominee in the same account.

****CUSTOMER SIGNATURE (S)**

I/We have read and understood the instructions on nomination given above/overleaf and I/We hereby undertake to abide by the same. The instructions contained herein supersedes all previous nominations made by me/us in respect of the deposit(s) mentioned above.

Signature ***Thumb impression(s) of Depositor(s)	Signature ***Thumb impression(s) of Depositor(s)	Signature ***Thumb impression(s) of Depositor(s)
Name of Depositor (s)	Name of Depositor (s)	Name of Depositor (s)

Witnesses:

1. Signature	2. Signature
Name:	Name:
Address:	Address:
Place:	Place:
Date:	Date:

**Strike out if nominee is not a minor*

*** Where deposit is made in the name of a minor the nomination must be signed by a person lawfully entitled to act on behalf of the minor.*

**** Thumb impression(s) to be attested by two witnesses.*