

NOMINEE INFORMATION FORM

INDIVIDUAL

Date

Account Number

1) Title of Account

In English (Block Letter) :

বাংলায় :

I/We nominate the following person(s) to receive the balance of this account in the event of my/our death. I/We shall have the right to cancel or amend this nomination at any time. I/We further confirm that Bank shall make payment as per this instruction and the payment made by the Bank to the nominee(s) shall constitute a full discharge of its liabilities in respect of such deposits/balance.

1 copy of Nominee's recent coloured passport size photograph attested by the Applicant

Number of Nominee(s) Type of Nominee Minor Adult

1) Name of Nominee :

a) Date of Birth b) Relationship with Applicant : c) Percentage of Share:

d) Permanent Address

House Name : Flat No. : Road No./Name :

Village/House/Holding No./Area : Block/Sector/Section : Police Station :

Post Office : Post Code : District : Country :

Phone/Mobile Number : e-mail ID :

e) ID Document : NID Passport Birth Registration Certificate Others (Please Specify)*

ID Number :

2) If the nominee(s) is/are minor, then in the event of death of the Applicant(s) the person with following details shall be eligible to receive the deposits/credit balance of the account on behalf of the nominee(s) remaining minor as per Section 103(2) of Banking Companies Act 1991:

a) Name : b) Relationship with Nominee:

c) Permanent Address

House Name : Flat No. : Road No./Name :

Village/House/Holding No./Area : Block/Sector/Section : Police Station :

Post Office : Post Code : District : Country :

Phone/Mobile Number : e-mail ID :

e) ID Document : NID Passport Birth Registration Certificate Others (Please Specify)*

ID Number :

Signature

Signature

Signature

Signature

Name :

Name :

Name :

Name :

Date :

Date :

Date :

Date :

1st Applicant

Joint Applicant

Joint Applicant

Joint Applicant

* Only applicable for Financial Inclusion Products and acceptable to the Bank.

Initial of Account Opening Officer

Initial of BOM/BRM