

Date : ___/__/20___

FORM-C

(See rule 6) APPLICATION FOR NOMINATION/CHANGE/CANCELLATION OF NOMINATION UNDER SENIOR CITIZENS SAVINGS SCHEME, 2004

	Chief / Branch Manager e Bank of India				
Sir /	Madam				
p	nominate the following person ersons, in the event of my ayable in accordance with the	death the amo	unt standing	to my credit in the ac	
		T.	ABLE		
SI. No.	Name(s) of the nominee(s) along with relationship with the depositor	Permanent	t Address	Date(s) of birth of nominee(s) in case of a minor/ age in other case(s)	Share of the nominee(s) in amount payable.
Photograph(s) of the Nominee(s)			Signature/Thumb impression of the Nominee(s)		
2 . *	As the Nominee(s) at Serial	No.(s) a	bove is/are r		/ Smt. / Kumari with Permanent
Address(es) of the person(s) in respect of each minor nominee] to receive the sum due under the said account in the event of my death during the minority of the nominee(s). 3. * This is in supersession of the nomination(s), made by me earlier at the time of opening of account/vide my application dated//20 4. * I, hereby request to cancel the nomination made by me earlier vide my application dated//20					
	Witnesses(Signature, nam	e and address	s): Signatuı	re/Thumb impression of	the Depositor(s)
1)			2)		
*Sco	://20 re out whichever is not applic	able. ******		******	*****
The :	above nomination has been /20 has been Changed/C	registered on _	//20	_ AND/OR the earlier no	

(Branch / Service Manager)