



THE SHIMOGA ARECANUT MANDY MERCHANTS CO-OP BANK LTD.,

A.P.M.C. YARD, SHIVAMOGGA-577 204.

Deposit A/c No.

Date

Customer ID No.

Share ID No.

CKYC I.D. No.

Please open a current/Recurring Deposit/Saving Bank/Fixed/GJC A/c. in my/our/in names (s) of

Name and permanent Address

Present Address

Cheque Book Required : Yes / No

TDS : Yes / No

15 G ☐

15 H ☐

Phone No.

PAN :

Aadhar No. :

Date of Birth & Age

Minor/Senior Citizen

: Date..... Age.....years

Amount of Deposit Rs.

Interest.....% P.A.

Monthly / Daily Contribution Rs.

Period.....Days/Months/Year

Special Instruction if any :

1)

2)

Signature of Depositor (s)

Introduced by : Name & Address :

A/c No. :

Signature :

THE SAMMCO BANK LTD.,
RISK CATEGORY

LOW

MEDIUM

HIGH

: For Officer Use :

Date :Clerk.....Officer.....Manager.....

Renewal Date	Amount	A/c. No.	Period	ROI p. a.	Due Date	Maturity Amount	Officer



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ESTD 1964

FORM DA 1

Noted on.....

.....p. Manager

Nomination u/s 45ZA read with section 56 of the Banking Regulation Act. 1949 &
Rule 2(1) of the Banking Cos (Nomination) Rules, 1985 in respect of Bank Deposits

Nature of Deposits & A/c No. :

I/We.....Nominate the following person to whom in the event of my / our /
minor's death the amount of the deposit, particulars where of are given above, may be returned. Nominee's

Name& Age.....

Address.....

relationship with depositor, if any.....if nominee is

a minor, his / her date of birth.....& as the nominee is

minor on this date. I / We appoint Sri / Smt. / Kum.....
(with age and address) to receive the amount of the deposit on behalf of the nominee in the event of my
/ our minor's death during the minority of the nominee.

Date :20

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



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ESTD 1964

FORM DA 3

Noted on.....

.....p. Manager

Nomination u/s 45ZA read with section 56 of the Banking Regulation Act. 1949 &
Rule 2(1) of the Banking Cos (Nomination) Rules, 1985 in respect of Bank Deposits

Nature of Deposits & A/c No. :

I/We.....Cancel the nomination made by me/us in favour
of.....and hereby nominate the following person to whom in the event of my / our /
minor's death the amount of the deposit, particulars where of are given above, may be returned.

Nominee's Name & Age.....

Address.....

relationship with depositor, if any.....if nominee is

a his / her date of birth.....& as the nominee is

minor on this date I / We appoint Sri / Smt. / Kum.....
(with age and address) to receive the amount of the deposit on behalf of the nominee in the event of my
/ our / minor's death during the minority of the nominee.