

[illegible]

Nomination

Nomination under Section 45 ZA read with section 56 of the Banking regulation act 1949 and Rule 2(1) of the Co-operative Banks(Nomination) Rules 1985 in respect of the Bank deposits. The nomination facility is available for all type of accounts & the account holder are advised to avail the facility for smooth settlement of claim by legal hier in unforeseen circumstances & nomination be made in favour of only on individual. In case the customer prefers not to nominate, the same has to be recorded on this form.

☐ I/We am / are not willing to nominate.

☐ Nomination required:

☐ Nomination Type: ☐ Successive ☐ Simultaneous

I/We nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the above account, may be returned by NKGSB Co-op. Bank Ltd.

No.	Full name of Nominee	Address of Nominee	Relationship with Nominee	Date of Birth dd/mm/yyyy	Age

*As the nominee is a minor on this date, I / We appoint Mr./Mrs. _____

Address _____ Date of Birth _____ Contact No. _____

Relation with Minor _____

To receive the amount of deposit on behalf of the nominee in the event of my/our minor's death during the minority of the nominee.

**where the deposit is made in the name of minor, the nomination should be signed by the person lawfully entitled to act on behalf of the minor.

☐ I / We the undersigned do not wish to make nomination in my / our aforesaid account.

 Signature

1 ST APPLICANT	2ND APPLICANT	3RD APPLICANT	4TH APPLICANT

Name : 1) _____ 2) _____ 3) _____ 4) _____

(Two witness mandatory in case of thumb impression)

Place: _____ Date:

D	D	M	M	Y	Y	Y	Y
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	Name	Address	Signature
Witness 1			
Witness 1			

☐ **Fatca - Crs Declaration** Please tick the applicable tax resident declaration (Any one)*

☐ I am a tax resident of India and not resident of any other country OR ☐ I am tax resident of the country/ies mentioned in the table below:
Please indicate the country/ies in which the entity is a resident for tax purposes and the associated Tax ID Number below:

City of Birth*

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 Country of Birth*

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Address Type for Tax Purpose*- ☐ Residential ☐ Business ☐ Registered Office

Country#	Tax Identification Number %	Identification Type (TIN or Other, please specify) %	Address For Tax Purpose*							
			☐ Communication Address	☐ Permanent Address ☐ Please note the address below						
			Landmark							
			Pin <table><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> State _____ Country _____							

*To also include USA, where the individual is a citizen / green card holder of USA % in case Tax Identification Number is not available, kindly provide functional equivalent³

FATCA-CRS Certification: I have understood the information requirements of this Form (read along with the FATCA/CRS instructions and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete and hereby accept the same.

Signature

Terms & Conditions:

1. Term Deposit receipt is not transferable & issued subject to the Bank's Rules and RBI directives from time to time.
2. All authorised signatories to the deposit, must sign the premature encashment instruction & the same will be governed by RBI Rules.
3. The deposits in the Bank are insured with DICGC for an amount of Rs. 5 lakhs (Principal + Interest) per depositor in **same right and same capacity**.
4. In case of premature withdrawal, interest will be paid at the rate prevailing on the date of deposit for the period for which the withdrawal amount remained with the bank or at the contracted rate, whichever is lower.
5. Premature withdrawal will attract 1 % penal charge on applicable interest rate as per terms & conditions of the Bank. In Recurring Deposit, a penalty will be levied for the delay in RD instalment payment for each month. The details of the said is available on Banks web site under service Charges.
6. Repayment of deposit & interest will be made as per Income Tax Rules & subject to TDS as applicable.
7. In absence of maturity instructions, the term deposit will not be renewed automatically. Grace period for renewal of deposit with retrospective effect is limited to 14 Days after maturity .
8. In case of monthly interest payment, interest will be paid at discounted rate as per RBI guidelines.
9. Self Declaration Form 121 for non-deduction of tax at source as applicable has to be submitted on or before 31st March for the following Financial Year in order to avoid TDS and/or while placing the deposit during the Financial Year. If not submitted TDS will be deducted as per rules and regulations. Tax once deducted at source will not be refunded.
10. Non submission of PAN by depositors will attract higher rate of TDS as applicable. In case of Form 121 being submitted to the Bank, PAN mentioned on the form should match with the Bank records.
11. Linking PAN and Aadhaar is mandatory as per GOI notification. If not linked then TDS will be deducted at highest rate prescribed as per IT rule. .
12. In the event the Bank identifies that the PAN is inoperative as per Rule 162 of the Income Tax Rule 2026 Tax Deducted at Source (TDS) shall be levied at the applicable higher rate as prescribed under section 397(2) Income Tax Act, 2025.
13. All communications to the Bank should consist of the Deposit No. / Customer No.
14. The deposit is allowed for Non-Resident Category also. The minimum tenor for NRE deposit is 1 Year.
15. If NRE FD or NRE RD is prematurely withdrawn before completion of one year then no interest will be paid.
16. In case of premature closure prior to 7 days, interest will be paid as per prevailing interest on saving Bank account.
17. Nomination registration is advisable by the Bank for depositor's benefits.
18. Payment of this deposit (Principle along with interest, if any) will be made prematurely to the surviving depositor / s in case of death of any the joint depositor.
19. In the event that the interest amount is insufficient to recover TDS, the bank will recover it from the maturity proceeds at the time of closure or renewal of Fixed Deposit with Bank or from Customer account.
20. In case of premature closure of the deposit, all the deposit holders need to mandatorily give their consent for its premature closure.
21. The above terms and conditions are subject to change without notice.

Declaration and undertaking by Applicant:

1. I/We have read and understood the rules of opening a Terms Deposit Account of the Bank and terms and conditions (which may be amended from time to time), I/We accept them as binding upon me/us. I/We accept and agree to be bound by terms and conditions limiting the Bank's liability.
2. I/We understand that the Bank may, at the absolute discretion, discontinue, any of the Term Deposit scheme without any notice to me/us.
3. The information provided by me/us in this Form is in accordance with Section 508 of the Income Tax Act, 2025 read with Rules 238 to 240 of the Income Tax Rules, 2026. It shall be our responsibility to educate myself / ourselves and to comply at all times with all relevant laws relating to reporting Under Section 508 of the Act read with Rules thereunder.
4. The information provided by me / us in this form is true, correct and compete to the best of my knowledge and belief, and that I/we have not with held any information that may affect the assessment / categorization of the account as a Reportable account or otherwise I/We hereby acknowledge that the Bank shall have right and authority to carry out investigations from the information available in public domain for confirming the information provided by me/us to the Bank at any point of time.
5. I provide consent to download my KYC records from the Central KYC Registry, update my information on the CKYC portal against my official documents, and send me direct communications and notifications regarding my KYC status via SMS and email.
6. The Declaration and Undertaking has been explained to me/us in my/our mother tongue. I/We have acknowledged the Declaration & Undertaking given by Bank.



Signature

1 ST APPLICANT

2ND APPLICANT

3RD APPLICANT

4TH APPLICANT

Name : 1) _____ 2) _____ 3) _____ 4) _____

Date (dd/mm/yyyy)* _____

Place* _____

Specimen Signature of Entity with Rubber Stamp

For Office Use Only

Account KYC Complied / due for ReKYC - yes ☐ No ☐

KYC documents obtained and Verified - Yes ☐ No ☐

Emp. Name _____ Emp. Code _____ Designation _____

Emp. Signature with Bank / Branch Stamp & Seal

Branch Name : _____

Date : ____/____/____

Please issue SDR / ARC / QIRP / FDR / MIP / RD / Annapurna Deposit in favour of _____
_____ for _____ day / month @ _____ % of ₹ _____ (Rupees _____
_____) with Mode of Operation _____

Emp. Signature with Bank/Branch Stamp