

FORM F

[See sub-paragraph (3) of paragraph 11]

RBL Bank Ltd.**Application for cancellation or change of nomination previously made in respect of
account under the Capital Gains Accounts Scheme, 1988**

To

The Branch Manager

RBL Bank Ltd.,

Branch Code: _____ Branch Name & address: _____

I, _____

[Name of the applicant/Depositor] Son/Daughter/Wife of __________ residing at

__________ **[Address****of the depositor]** hereby **cancel the nomination made by me** in respect of my Account/Accounts
mentioned under column 2 hereunder:**2. Details of Account/Accounts****(1) Account-A No.**Nomination made on **DD / MM /YYYY**

in favour of _____

(2) Account-B No.Nomination made on **DD / MM /YYYY**

in favour of _____

3. In the place of the cancelled nomination referred to under column 2 hereinabove, I hereby nominate
the person(s) mentioned below to whom, to the exclusion of all other persons, in the event of my death,
the amount standing to my credit in the account/accounts mentioned under column 2 hereinabove would
be payable.

| Sl. No. | Name(s) of the nominee(s) | Relationship | Full address(es) | Date of birth of nominee in case of minor |
|---------|---------------------------|--------------|------------------|---|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

As the nominee(s) at Serial No.(s) _____ stated above is/are minor(s), I appoint [Name]

Shri/Smt./Kumari _____

_____ residing at

_____ [Full address]

as the person to receive the sum due under the said account(s) in the event of my death during the minority of the nominee(s).

| | |
|---|---------------|
| Signature of witness: | |
| Name and Address: | |
| Signature/Thumb impression of the Depositor | |
| PAN & Distt./Ward/Circle/Range where assessed | |
| Date: DD / MM/ YYYY | Place: |

FOR THE USE OF DEPOSIT OFFICE

The nomination referred to under column 2 hereinabove has been cancelled and fresh nomination as per column 3 hereinabove has been registered on **DD / MM / YYYY** and accordingly entry has been made in the Pass book for **account-A** No. _____ Deposit Receipt No. _____ for **account-B** No. _____ referred to Under the column 2 hereinabove.

| Branch Official Details (SDM Or above) | |
|---|-----------------------|
| Name | |
| Employee ID | |
| Signature | |
| Designation | |
| Date | DD / MM / YYYY |

Note:

Delete whatever is not applicable. If space provided under the columns hereinabove is not sufficient to furnish the requisite details, the same may be done by way of using separate enclosure and referring to the same under the respective columns.