

The Jammu & Kashmir Bank Corporate Headquarters M A Road, Srinagar 190 001

Branch			
branch			

bearing No.....

Customer	Id N	0.								
										(Office Use Only)
Account N	lo.									
						 	1			(Office Use Only)
Date	. 1		i		1					

We	
Name(s) and Address(es)	
cancel the nomination made by me in favour ofName(s) ar	nd Address(es)
and hereby nominate the following person (s) to whom in	n the event of the death of one or more of us, the Jammu & Kashmir Bank lto
	in which the locker is situated) may give access t
	particulars whereof are given below, jointly with the survivor or survivors of us.
Full Name (IN BLOCK LETTERS)	
Address with Telephone / Fax Mobile / E-mail Etc.	
Pin code City	
Relationship with Depositor, if any	Date of Birth
*As the nominee is a minor on this date, I appointNar	ne(s) and Address(es)
to receive articles in safe custody on behalf of the noming Personal Details of Your Witnesses Witness 1	me(s) and Address(es) mee in the event of my /our/minor's death during the minority of the nominee. Witness 2
to receive articles in safe custody on behalf of the noming Personal Details of Your Witnesses	nee in the event of my /our/minor's death during the minority of the nominee. Witness 2
to receive articles in safe custody on behalf of the noming Personal Details of Your Witnesses Witness 1 Name	mee in the event of my /our/minor's death during the minority of the nominee. Witness 2
to receive articles in safe custody on behalf of the noming Personal Details of Your Witnesses Witness 1 Name Address	mee in the event of my /our/minor's death during the minority of the nominee. Witness 2
to receive articles in safe custody on behalf of the noming Personal Details of Your Witnesses Witness 1 Name Address Signature	mee in the event of my /our/minor's death during the minority of the nominee. Witness 2
to receive articles in safe custody on behalf of the noming Personal Details of Your Witnesses Witness 1 Name Address Signature Place	mee in the event of my /our/minor's death during the minority of the nominee. Witness 2
to receive articles in safe custody on behalf of the noming Personal Details of Your Witnesses Witness 1 Name Address Signature Place Date Signature / ** Thumb impression of Depositor Leave out if nominee is not a minor.	mee in the event of my /our/minor's death during the minority of the nominee. Witness 2