

Nominee's Personal Information Form

For Bank's use only	
A/C No.	<input type="text"/>
Unique Customer Identification Code	<input type="text"/>
Group Code	<input type="text"/>

Photograph

I/We are nominating the following individual(s) as my/our nominee(s) to pay the amount of my/our account after my/our death. I/We preserve the right to change or cancel the nomination at any time and hereby further agree that the bank will pay money as per my/our instruction and upon payment of said money, bank will be released from all liabilities towards nominees.

1. Nominee's Name

2. Date of Birth 3. Relation with A/C Holder

4. a) Present address:

Road/Village	<input type="text"/>	PO	<input type="text"/>
Thana	<input type="text"/>	District	<input type="text"/>
Contact no.	<input type="text"/>	E-mail	<input type="text"/>

b) Permanent address:

Road/Village	<input type="text"/>	PO	<input type="text"/>
Thana	<input type="text"/>	District	<input type="text"/>
Contact no.	<input type="text"/>	E-mail	<input type="text"/>

5. Identification Documents: NID Passport Birth Certificate Others

(a) Identification No. 6. Percentage

1st Applicant's Signature with Name & Date

2nd Applicant's Signature with Name & Date

A/C Opening Officer
(With Name Seal, Signature & Date)

BM/OM
(With Name Seal, Signature & Date)