

**NOMINATION FORM – 1**

**INCLUSION OF NOMINEE**

I \_\_\_\_\_ [ name and address of the Depositor ] nominate the following person to whom in the event of my death the amount of the deposit, particulars whereof are given below, may be returned by TAMILNADU TRANSPORT DEVELOPMENT FINANCE CORPORATION LIMITED.

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Deposit				Nominee			
FDR No.	Date of Deposit	Date of Maturity	Amount	Name	Address	Relationship	Age if nominee is a minor his date of Birth

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As the nominee is a minor on this date, I appoint Mr/Ms. \_\_\_\_\_ (name, address and age) to receive the amount of the deposit on behalf of the nominee event of my/our/minor's death during the minority of the nominee.

**Witness:**

**Signature of the depositor**

- 1.
- 2.

Place :

Date :