

FORM 2

DEPARTMENT OF POSTS

[See Rule 14(1)]

Serial No.....

FORM OF APPLICATION FOR NOMINATION UNDER SECTION 6 OF THE GOVERNMENT SAVINGS CERTIFICATES ACT, 1959

(This form will be filled in by the holder(s) and submitted with the certificates to the Postmaster of the office where the certificates stand registered)

To The Postmaster .....

Under the provisions of Section 6(1) of the Government Savings Certificates Act 1959, I/We ..... the holder(s) of Savings Certificates detailed on the reverse hereby nominate the persons mentioned below, who shall be on my/our death, become entitled to the Savings Certificate(s) and to be paid the sum due thereon to the exclusion of all other persons. I/We hereby declare that I/We have not so far made any nomination in respect of these certificates. The certificates are enclosed.

Table with 4 columns: SI No, Name of the nominee(s), Full Address, Date of birth of nominee in case of minor

2 As the nominee(s) at the serial number(s) .....above is/are minor(s), I/We appoint Sri/Smt/Kumari ..... (name and full address) as the person to receive the sum due thereto in the event of my/our death during the minority of the nominee(s).

3 The Certificates detailed below are enclosed :-

Table with 4 columns: Serial No. of certificates, Denomination, Date of Birth, Office of issue

Address .....

Yours faithfully

Signature (or thumb impression, if Illiterate) of holder(s)

(in case of illiterate holder, father's name should be given)

Witnesses .....

Name .....

Address (1) .....

Name .....

Address (2) .....

NB : In the case of illiterate holders, the witnesses shall be persons whose signature are known to the Post Office.

Order of the Postmaster accepting the nomination

Date Stamp of  
Post Office

Signature of Head/Sub Postmaster