Declaration Form For opting out of nomination

TO KOSAMATTAM FINANCE LTD KOSAMATTAM CITY CENTER, KOTTAYAM

Dear Sir/ Madam, I/We hereby confirm to understand the issues case of death of all the requisite documents / it may also include documents value of assets held in	involved in account he information ments issu	n non-apolder(s), on for cla ned by Co	ppoint my/ iming ourt o	ment o our leg of ass	f nor al he ets h	minee(irs wo eld in 1	s) and uld nee my/o	further ed to sul ur dema	are a omit a at acc	ware all the ount,	e tha e , whi	ch
BO ACCOUNT DETAILS 1 3 0 7	9 2	0	0									
Name of the Sole / First Name of Second Holde Name of Third Holder												
Name	First/Sole Holder			Second Holder			Third Holder					
Signature												
Note: Signature of witness, a thumb impression, inst	-		nd ado	lress a	re re	quired	, if the	accoun	t hold	der af	ffixes	3
		W	/itness	Det	ails							
Name			dress			Signature						

For Kosamattam Finance Ltd (Authorised Signatory)