

**Nomination Form for Safe Deposit Lockers**

Date:

The Manager  
Standard Chartered Bank Nepal Ltd.  
\_\_\_\_\_ Branch

**Subject: Appointment of Nominee**

Dear Sir,

I \_\_\_\_\_  Son  Daughter of \_\_\_\_\_  
hereby nominate \_\_\_\_\_ to receive all the  
valuables kept in my Safe Deposit Locker no. \_\_\_\_\_ held at your bank in the event of my  
death. The details of the nominee are as under:

Nominee's Father's Mother's Name: \_\_\_\_\_

Nominee's Age: \_\_\_\_\_ Nominee's relationship to me: \_\_\_\_\_

Nominee's telephone no.: \_\_\_\_\_

Nominee's Mailing Address: \_\_\_\_\_

If the nominee is a minor at the time of my death, I appoint Mr/Mrs/Ms: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_ to receive all the valuables on behalf of the nominee.

Thanking you,

Yours sincerely

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Account No.: \_\_\_\_\_

**Disclosure clause (Appendix 2)**

I/We hereby consent to the Bank, its officers and agents disclosing information relating to me/us and my/our account(s) and/or dealing relationship(s) with the Bank and Standard Chartered Bank (including all its branches) ("**SCB**"), including but not limited to details of my/our facilities, any security taken, transactions undertaken and balances and positions with the Bank and SCB, to

- (i) the head office of the Bank, any of its subsidiaries or subsidiaries of its holding company, affiliates, representative and branch offices in any jurisdiction (the "Permitted Parties");
- (ii) the agents and independent contractors of the Permitted Parties who are under a duty of confidentiality to the Permitted Parties;
- (iii) any actual or potential participant or sub-participant in relation to any of the Bank's rights and/or obligations under any agreement between us, or assignee, novatee or transferee (any agent or adviser of any of the foregoing);
- (iv) any rating agency, insurer or insurance broker of, or direct or indirect provider of credit protection to any Permitted Party;
- (v) any court or tribunal or regulatory, supervisory, governmental or quasi-governmental authority with jurisdiction over the Permitted Parties.

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Name:

Signature:

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Name:

Signature: