INDEMNITY BOND

Mr/Ms._____, was a member of your Society. He/ she was also maintaining a Savings Account No.____ and the balance standing to the credit of the same is Rs._____. He/She died intestate at _____ on ____, leaving behind me/us surviving as one of the and only heirs and legal representatives according to the law.

That in consideration of your redeeming and paying the savings balance of my deceased ______ to me/us, I _____, and ______ the _____ and ______ of the deceased, so as to bind myself, my respective heirs, executors, administrators, agree and undertake with you and your successors as follows:-

a) to keep you safe and indemnified against all claims, including the claim of minor, regarding his/her share if made by him/her on attaining majority, demands, suits, actions proceedings. loss, damage, cost, charges and expenses which may be made or brought or commenced against you or be paid, sustained, suffered or incurred by you, as consequence direct or indirect of the said payment in pursuance of the foregoing request and without production of succession certificate;

b) to pay to you on demand the amount of any such loss, damage, cost, charges and expenses together with interest at 12% per annum from the date of payment by you until reimbursement by me/us.

date:

WITNESS:-

We, jointly and severally guarantee the due performance of the above undertakig and agreement of

Name and address of witness:

Signature

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- 1) SHRI

2) SHRI