(TO T		ORM OF INDEMNITY	TTD ( )
		MP PAPER OF  Rs. 100/- (Rs. 200 FOR MAHARASH IKE VALUE IF EXECUTED ON PLAIN PAPER]	ITRA)
11110	INDEMNITY made this day of son/daughter/wife of	residing at	
	(hereinafter	r referred to as the "Indemnifier", which expres	sion shall
unless	excluded by or repugnant to the cont	ext includes his/her heirs, executors, administrat	ors, legal
	sentative and assigns) of the ONE PART a	andLtd. a Company	within the
meani		1956 and having its Registered O	
		(hereinafter referred to as "the Company	y" which
		t to the context or meaning thereof include its succe	essors and
	s) of the OTHER PART. REAS:		
a.		as a registered shareholder ofequity	charec hearing
a.	Distinctive nosw	to	
	referred to as "the said shares") in the Con	nnanv.	(Heremarter
b.	The Indemnifier(s) has/have		t the said
	late	died	
	intestate/leaving his/her last will dated	(attested copy enclosed ) on the	day
		d his/her wife/husband/sons/daughters /named	
	below as his/her sole /joint heir/s and legal	representative/s :-	
			_
		-	_
0	The Indomnifier/s bas/baye further representation	ented that the said Master	islara minor
c.	and Mr/Mrs.	is his/her/their father/mother and natural gual	is/are illillor rdian
d.		the Company to transmit the name/s of the Inder	
		e above shares in place of the late	
		ant in his/her /their favour from a competent court.	
e.		b) above has/have represented to the Company that I	ne/she/they has/
	have no objection to such transmission.		•
f.		representations and upon the Indemnifier/s executiv	
		by a person of standing being these presents has ag	reed to transmit
		e name of the Indemnifier/s.	
NOW	THESE PRESENTS WITNESS AS FOLLO	OWS:	
_			
		tion of the premises, I/We, the Indemnifier/s hereby a	
		the Company, its Directors against all actions, clai	
		uences whatsoever which shall or may be brought	
		homsoever or which the Company may pay, suffer	
		registering me/us as a member/s in respect of the	
	our of me/us from a Competent court as af	without production of an appropriate l	egai graiit
III Iavo	ou of me, us from a competent court as an	oresaid.	
IN W	TITNESS THEREOF THE above nam	ned Mr/Mrs	(name of
	nifier)has /have executed these presents the		Manie of
	problem the		
Signed	l and delivered by the within named		
	<u>-</u> 		
	IE PRESENCE OF	Signature(s) of the Indemnifier(s)	
(Name	e and address of witness to be given)	Name in Full	
		Address	

# Counter Guarantee to the Indemnity) (to be executed by the person executing Form 'B'- Particulars of Guarantor)

I (name of guarantor )concur in the above request and guarantee to the performance of the above agreement and undertaking by the said Indemnifier) and/or his/her executors, administrators, successors and representative.  Full Name of Guarantor Signature of Guarantor				
Address				
Place	Date			
Witness:-				
Full Name/Address/Occupation/Signature				
(To be submitted duly attested by the Magistrate or	Manager of the Bank )			

TO BE EXECUTED BY THE PERSON ON NON JUDICIAL STAMP PAPER OF RS.20/( RS.100/- FOR MAHARASHTRA) AND TO BE ATTESTED BY THE MAGISTRATE OR BY THE
MANAGER OF THE BANK WHO WILL EXECUTE THE COUNTER-GUARANTEE TO THE
INDEMNITY BOND

### FORM-B

(Private & Confidential)

(Statement to be signed by the proposed Guarantor for the issue of duplicate Share Certificate)

- 1. Full Name of the Guarantor
- 2. Name of the father of the Guarantor
- 3. Full address of the Guarantor
- 4. Age of the Guarantor
- 5. If employed, place of employment designation, name and address of the employer and the total monthly emoluments drawn. (please enclose the photocopy of salary Certificate or I.T. Return)
- 6. If in business, description of the business, trading style and address of the business concerned, annual turnover and profits.

  (Please enclose the photocopy of I.T. Return)
- 7. If in independent profession, nature of profession, place where practised and annual earnings, (Please enclose the photocopy of I.T. Return)
- 8. If a property-holder, details of immovable property, owned viz. nature of property, situation and value (Documentary evidence issued by the prescribed authority)
- 9. Proof of identity (photocopy of Driving License or PAN)

Signature of the Guarantor
duly attested by the Magistrate/
Notary public/ Manager of theBank

Date:

## **AFFIDAVIT**

_	of for Maharashtra)]			
Make	oath and solemnly state as under :-			
1.	That Mr/Mrswas/were the holder ofshares under Registered folio Nobearing distinctive nostoinLtd. died intestate/leaving a will (copy enclosed) on or aboutleaving behind the following person(s) as his/her legal heir(s) to his/her Estate and Property.			
	Name Relationship			
2.	That the above legal heirs desires/wants the aforesaid shares transmitted into their names/into the sole name of without production of an appropriate legal grant in their/his/her favour from a Court of Competent jurisdiction.			
3.	That in consideration of effecting transmission as above the legal heirs also furnished an Indemnity Bond to the abovenamed Company on Non judicial stamp paper of Rs.50/-dated			
believi thereo				
Solem	nly declared atthisDayOf200			

# **CONSENT LETTER**

[To be executed on Non Judicial Stamp Paper of Rs.20/- (Rs. 100 for Maharashtra) and d attested by Manager of the Bank]						
BEARING DISTING	SELONGING TO MR./MRS.					
We	We are heirs and legal representative of					
Mr./Mrs./Ms.	(deceased). The said deceased died on					
leaving Mr./Mrs./Ms	(name of Indemnifier) and us as his/he					
heirs and legal representa	tives. The said deceased at the time of his/her death was the owne					
of the above shares of th	e nominal value of Rs.10/- each inLtd W					
hereby consent to the	said shares being transferred to the name of Mr./Mrs./Ms					
*	f Indemnifier) in the records of the Company and hereby furthe					
	outstanding dividends on the said shares to Mr./Mrs./Ms					
•••••	(name of Indemnifier)					
Name (s) in block letters	Signature(s) Address(es)					
Dated this	day of					