## INDEMNITY BOND

(Applicable only in case of misplace of Demand Draft)

(on Stamp Paper of requisite value prevailing in the State)

## Annexure B

•		splaced demand draft as per details givent search made by me/us for the same:	en belov
UNIT:	(the Compar	ny)	
Name of the Security holde	r:		
No. of NCSs	Demand Draft No.	Interest/ Dividend/ Rede Amount	mption
I/We confirm and undertak	e that I/We have not en-cas	I in the manner herein after stated.  shed, charged, pledged, created any lie eate any adverse claim upon the amount	-
heir(s), executor(s), administ Limited, its successors and respective heir(s), executor(all actions, causes, suits,	with bandstrator(s) and assign(s) agreed assigns and the Director (s) and administrator(s) and approceedings, accounts, claim	npany credit the said amount in my bank nk, I/We hereby for myself/ourselves, e to indemnify and save harmless Berar rs, Employees and Officers thereof a each of their estates and effects from and ims and demands whatsoever and ag incurred in respect thereof or in relation	, my/our Finance and their dagains gainst al
	f the aforesaid original Den	mand Draft is hereafter found, then I/V Company for cancellation.	We shal
the demand Draft when fou	nd or traced and to take all	to produce and return forthwith to the C actions, suits and proceedings at our ow or otherwise in relation to the said premark.	wn costs
IN WITNESS WHEREOF RESPECTIVE HAND AT	I/WE HERETO HAVE F	HEREUNTO SET AND SUBSCRIBE	ED OUF
ON	DAY OF		
Name of the Applicant(s):	1	Name of the Joint Holder:	
Signature:	S	Signature:	

Name of the Witness no. 1:	Name of the Witness no. 2:
Address:	Address:
Signature:	Signature:

Note: In case of joint holding all the Applicants should sign.