

ANNEXURE V

Indemnity Bond for Change of Karta in respect of MF Units upon demise of the Karta

[To be submitted in non-judicial stamp paper as per the value prescribed by the respective State subject]

(To be signed by all the co-parceners including the new Karta)

	The HUF has investments in in the following	The HUF has investments in in the following Schemes / folios of						
	Scheme Name		Folio No.	No. of Units				
۱.								
2.								
3.								
4. i)	The Karta of the above HUF, Mr.							
,	who was managing the affairs of the HU	IF expired on	and the n	and the persons mentioned				
	below are the only living member(s) of the I	_	und the p					
	Name of the coparcener(s)	Address	Date of	Relation with the				
_	tvaine of the coparecner(s)	Address	Birth	deceased Karta				
1.								
2.								
3.								
4.								
	I/We have, therefore, approached you with a Mr./Ms. Karta of the HUF in your records for which I information herein given by us believing the	I/We execute an indemnity as is same to be true.	s herein contained an	as the ad on relying on the				
•)	In consideration therefore of the name of the Karta in the aforesaid Mutual severely agree and undertake to indemnify Mutual Fund a costs, claims, actions, demands, risks, charge	oll Fund folios in the place of decand keep indemnified, saved, of and its successors and assigns for	defended, harmless or all time hereafter a	hereby jointly and against all losses,				
	and/or incur by reason of acceding to and acti	ng on my/our request as herein	above mentioned.					
' v	ve hereby state that whatever is stated herein	above are true to the best of n	ny/our knowledge ర	& belief.				
1	WITNESS WHEREOF, I/we have hereunto	set my/our hand/s and seal/s th	nis day of					
igı	ned and delivered by		T					
	Name the Coparcener/s			Signature				
1.								
1.								
2.								

SURETY

I/we,	the undersig	gned Su	rety, certify	y that the	above fa	icts are tr	ue to the	e best	of my/c	ur kno	wledge	and b	ind my	self/ou	rselves
as S	Surety to	make	good all	claims,	charges	s, costs,	dama	ges,	demand	ls, ex	penses	and	losses	whice	ch the
				Mut	ual Fund	l, its suc	cessors	and	assigns	may s	ustain,	incur	or be	liable	for in
consequence of complying with the request contained above of the coparceners hereinabove and the said Mutual Fund and															
its su	iccessors, as	signs w	ill be entitle	ed to clai	m and rea	alise all c	claims, c	charge	es, costs	, damag	ges, de	mands	, expen	ses and	losses
from	me or from	my pro	perties, as	the case i	may be.										
	T														_
S.No).		Sureties N	Name & Ac	ddress (Ma	ndatory)						Signat	ure of th	ie Surety	Y
1.															
									X						
2.															
									X						
Signed before me															
D.I															
Place															
Date	:														

Signature of Notary with Official Seal of Notary