

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)

	e, the below mentioned surviving co-parcener(s) einafter referred to as "the HUF") hereby solem				nily HUF,		
(i)	The HUF has investments in in the follow	ving Schemes / folios	of		Mutual Fund		
	Scheme Name	8	Folio	No.	No. of Units		
1.							
2.							
3.							
4.	The Vente of the chore IIII Ma						
(ii)	The Karta of the above HUF, Mr. who was managing the affairs of the HUF		and the no	ersons mentioned			
	below are the only living member(s) of the HU	•		and the po	ersons mentioned		
,	Name of the coparcener(s)	Address		Data of	Relation with the		
	value of the coparcener(s)	Address	S	Birth	deceased Karta		
1.							
2.							
3.							
4.							
(iv)	I/We have, therefore, approached you with a re Mr./Ms Karta of the HUF in your records for which I/W information herein given by us believing the sa	Ve execute an indemnity			as the nev		
(v)	In consideration therefore of the name of the Karta in the aforesaid Mutual I severely agree and undertake to indemnify an Mutual Fund and costs, claims, actions, demands, risks, charges,	f deceased Kar ed, defended, l ns for all time	rta, I/We l harmless hereafter a	against all losses,			
	and/or incur by reason of acceding to and acting	-					
I / w	e hereby state that whatever is stated herein al	bove are true to the best	of my/our kno	owledge &	belief.		
IN V	VITNESS WHEREOF, I/we have hereunto set	t my/our hand/s and seal	/s this d	ay of			
Sign	ed and delivered by						
	Name the Coparcener/s				Signature		
1.				×			
2.							
3.							
4.							

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 successors, assigns will be entitled to claim and realise all claims, charges, costs, damages, demands, expenses and losses															
from	me or from	my pro	perties, as	the case i	may be.										
	T														_
S.No).	Sureties Name & Address (Mandatory)									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