## **BOND OF INDEMNITY**

Whereas:	I/We									of
Post Office	Box Number		_/	/			have appl	ied to	PRIME BANK	(LTD.
		(Box no)	(city)		(code)					
(			BRANCH)	(the	"Bank")	for	issuance	ofa	replacement	of the
following I	nstrument/ FDR	previous	ly applied	for ar	nd issued	by	the Bank	which	Instrument /	FDR is
now lost, s	tolen, misplaced	l or is oth	erwise unt	raceal	ble:					

## **DETAILS OF THE INSTRUMENT/ FDR:**

Number	:	
Date of issue		
Favouring		
Amount		
Amount in words	-	
Maturity Date (in case of Fixed Deposit) Drawn on	· · ·	
(in case of Demand Draft)	Bank name	Place
Remarks (if any)	:	

NOW, the above named person(s) IN CONSIDERATION of the Bank issuing me/us with a duplicate/replacement Instrument/ FDR upon my/our request and instance, hereby undertake to indemnify the Bank on a full and unqualified indemnity basis and to hold harmless the Bank from and against any loss, damage, cost, expense, suit, demand, action, claim or proceeding suffered or incurred by or against the Bank resulting (whether directly or indirectly) from the Bank issuing to us, the Duplicate/Replacement Instrument/ FDR or in respect of the lost, stolen, misplaced or is otherwise untraceable Instrument / FDR or by any person or persons claiming to be the legal or beneficial holders thereof or being in any way interested therein whatsoever.

Given under my/our hand(s) at			this	day of		20 .	
	C HOLDERS:	(place)	(date)		(month)		
Nar	me :		Signature :				
Nar	me :		Signature :				
Nar	me :		Signature :				
<u>WI</u>	TNESS:						
1. Name :			Address				
	Signature						
2.	Name :		Address	:			
	Signature						