

**Annexure E** 

Note: To be executed in the presence of a Public Notary / Gazetted Officer

Bond of Indemnity to be furnished jointly by all Legal Heir(s) including the Claimant(s)

(To be submitted on Non-judicial Stamp Paper of appropriate value)

## [For Transmission of Securities on death of Sole Securities' Holder, where no nomination has been registered]

Name of the deceased holder was holding

I/We do hereby solemnly affirm and state on oath as follows:

That Mr. /Ms.

| Name of the Company   | Certificate No.                          | Distinctive No.   | Foli    | o No.                      |                  | lo. of<br>ities he   | eld |
|---|--|---|---------|----------------------------|------------------|----------------------|-----|
| 1   |  |   |         |                            |                  |                      |     |
| 2   |  |   |         |                            |                  |                      |     |
| 3   |  |   |         |                            |                  |                      |     |
| 4   |  |   |         |                            |                  |                      |     |
| surviving legal heirs<br>by which he/she wa   | minee, leaving be s, according to the    | hind him/her the fo<br>laws of intestate suc<br>time of his/her death | cessio  | n applica                  | able to          |                      | /   |
| Name of the Legal Heir(s)/Claimant(s)   |  | contact details   | Age     | Relationship with Deceased |                  | WILLI                | tne |
| 1   |  |   |         |                            |                  |                      |     |
| 2   |  |   |         |                            |                  |                      |     |
| 3   |  |   |         |                            |                  |                      |     |
|   |  |   |         |                            |                  |                      |     |
| 4   |  |   |         |                            |                  |                      |     |
| 4   |  | OR  |         |                            |                  |                      |     |
| That the aforesaid  | ng behind him/her                        | died on<br>the following persor                                       | ns as t |                            |                  | gisterinç<br>ng lega | -   |
| That the aforesaid any nominee, leavi   | ng behind him/her<br>the laws of testame | died on<br>the following persor                                       | ns as t | the only                   | survivi<br>nship |                      | -   |
| That the aforesaid any nominee, leavi heirs, according to Name of the Legal                     | ng behind him/her<br>the laws of testame | died on   |         | Relation                   | survivi<br>nship | ng lega              | ĺ   |
| That the aforesaid any nominee, leavi heirs, according to Name of the Legal Heir(s)/Claimant(s) | ng behind him/her<br>the laws of testame | died on   |         | Relation                   | survivi<br>nship | ng lega              | ĺ   |



| Therefore, I/We, the Legal Heir(s)/Claimant approached   | t(s) and deponent(s) herein has/have, (Name of the Company/RTA) with a  |
|--|---|
| request to transmit the aforesaid securities in [Name(s) of heir(s)/claimant(s)]   | the name of the undersigned Mr. /Ms. the legal #, on  |
| my/our behalf, without insisting on production Will / Letter of Administration or any Court ord is herein contained and on relying on the information same to be true. | ler, for which we execute an indemnity as   |
| In consideration therefore of my/our reque securities to the name of the undersign heir(s)/claimant(s) ] #,  |   |
| hereunto set their respective hands and seals  | ne of the Company/ Issuer and any RTA] ereafter against all losses, costs, claims, amages, etc., whatsoever which they may ag the said securities as herein above rsigned Mr./Ms. [Name(s) of the legal |
| Name the Legal Heirs   | Signature of the<br>Legal Heirs   |
| 1  | X   |
| 2  | X   |
| 3  | X   |
| (*) = Name of the deceased security holder  Signed before at:  | (#) = Name of the claimant/s e me   |
| on:<br>Signature of Notary   |   |
| Official stamp & seal of the Notary & Regn. No   |   |