

Annexure VI

Bond of Indemnity to be submitted by the Claimant on dissolution of HUF or where there are no surviving members after demise of the Karta

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

I, _____ aged _____ years, presently residing at _____ and surviving member of _____ *Name of the Hindu Undivided Family* HUF, (hereinafter referred to as "the HUF") hereby solemnly affirm and state on oath as under:

1. That the HUF has investments/units in the following schemes/folios:

| Scheme Name | Folio No. | No. of Units |
|-------------|-----------|--------------|
| 1) | | |
| 2) | | |
| 3) | | |
| 4) | | |

2. That Mr. _____ who was managing the affairs of the HUF as its the Karta, expired on _____.

3. That after the death of the abovenamed Karta, the aforesaid HUF stands dissolved, as there are no other surviving coparcener except myself * OR as the surviving members of the HUF have decided to dissolve / partition the HUF vide Settlement Deed / Partition Deed / Court Decree dated*.

4. That I have approached _____ Mutual Fund with a request to transmit the aforesaid Units / proportional units as per the Settlement Deed / Partition Deed / Court Decree dated(hereinafter referred to as "the Units" in my name, in your records for which I execute the indemnity as is herein contained and on relying on the information herein given by me believing the same to be true.

5. That I agree and undertake to provide all necessary documents as may be required by _____ Mutual Fund for processing my request as aforesaid.

In consideration therefore of _____ Mutual Fund acceding to my request to transmit the Units in the Mutual Fund folios in my name, I/We hereby jointly and severally agree and undertake to indemnify and keep indemnified, saved, defended, harmless _____ Mutual Fund, its asset management company and its successors and assigns for all time hereafter against all losses, costs, claims, actions, demands, risks, charges, expenses, damages, etc., whatsoever which the mutual fund may suffer and/or incur by reason of acceding to and acting on my/our request as herein above mentioned.

I / we hereby state that whatever is stated herein above are true to the best of my/our knowledge & belief.

IN WITNESS WHEREOF, I/we have hereunto set my/our hand/s and seal/s this ____ day of _____

Signed and delivered by the within named

Name of the Claimant

.....
Signature of the Claimant

Signed before me

Place: _____

Date : _____

Signature of Notary with Official Seal of Notary