

**INDEMNITY BOND FOR DUPLICATE FIXED DEPOSIT RECEIPT**

*(To be executed on Rs.100/- non-judicial stamp paper)*

I/We am/ are fixed depositor (s) of the DCM Financial Services Limited and hold fixed deposits as per the details below:

FDR NO.	Amount

I/We hereby confirm that I/we have received the FIXED DEPOSIT RECEIPT/s in respect of the said deposits but they are lost/ misplaced. The said deposit receipt (s) and that I/we have not nor has any person by me/our order in any manner disposed off parted with or pledged the said deposit receipts or assigned my/our interest therein or any part thereof to any person. I/we am/are the sole and absolute owners of the fixed deposit receipt (s), I/we will surrender or cause the same to be surrendered to the DCM Financial Services Limited , if and when the same are found.

I/We therefore request to issue a duplicate of the said deposit receipt (s).

In consideration of the DCM Financial Services Limited so doing, I/we hereby indemnify the DCM Financial Services Limited and bind myself/ ourselves, our heirs, executors and administrators to pay all claims, charges, costs, damages, demands, expenses and losses, which the said DCM Financial Services Limited may sustain, incur or be liable for in consequence of having issued duplicate fixed deposit receipt (s) as per my/our request. The DCM Financial Services Limited may realize the said claims charges, costs, damages, demands, expenses and losses from me/us personally, either individually or jointly, or my/our heirs executors or administrators or properties as the case may be.

I/We, the undersigned, certify that the above facts are true and bind myself/ ourselves to make good all claims, charges, costs, damages incurred or be liable for in consequence of complying with the request contained above and the DCM Financial Services Limited will be entitled to realize all claims, charges, costs, damages, demands, expenses and losses from my/ our persons or my/our heirs or my/our properties, as the case may be.

IN WITNESS THEREOF I/WE SIGNED THIS THE .....DAY OF  
.....TWO THOUSAND \_\_\_\_\_.

NAME(S) &  
ADDRESS OF FDR HOLDER(S)

SIGNATURE OF FDR HOLDER(S)

1)

.....

2)

.....

3)

.....

NAME & ADDRESS OF WITNESS

SIGNATURE OF WITNESS

.....