

AMFI



ASSOCIATION OF MUTUAL FUNDS IN INDIA

(To be signed by all the coparceners including the new Karta)

Annexure - V : INDEMNITY BOND WITH RESPECT TO CHANGE OF KARTA / TO TRANSFER OF THE MUTUAL FUND UNITS HELD BY THE DECEASED KARTA WITH PRODUCTION OF DEATH CERTIFICATE OF KARTA

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

S No.	Name of Mutual Fund	Scheme Name	Folio No	No. of Units Hold

I/We inform you that “Mr. / Ms. ^(*) _____”passed away on _____ and he was the Karta of the HUF and holding the following Mutual Fund Units:

I /We inform you that the following are the only living members of the _____ (Name of the HUF) and that there are no other members / coparceners for the said HUF:

Sl.No. Name Age D.O.B.

1

2

I /We further inform you that Mr. “Mr. / Ms. ^(#) _____”is the senior most coparcener of the HUF/ is the new Karta duly appointed by all the members.

I/We have, therefore, approached you with a request to replace the name of the deceased Karta with the name of the new Karta Mr. “Mr. / Ms. ^(#) _____” for which I /We execute an indemnity as is herein contained and on relying on the information herein given by us believing the same to be true.

In consideration thereof my / our request to replace the name of the Karta in the above said Mutual Fund units in the place of deceased Karta I/We hereby agree and undertake to indemnify and keep indemnified, saved, defended, harmless you and your successors and assigns for all time hereafter against all losses, costs, claims, actions, demands, risks, charges, expenses, damages, etc., whatsoever which you may suffer and/or incur by reason of your, at my/ our request.

IN WITNESS WHEREOF THE said “Mr. / Ms. ^(S) _____”has here unto set their respective hands and seals this _____ day of _____.

Signed and delivered by the said applicant. (Name of the Karta)

1. _____

^(*) = Name of the deceased Karta [Unit Holder]

^(#) =Name of the new Karta

^(S) = Name of the members of HUF

AMFI



ASSOCIATION OF MUTUAL FUNDS IN INDIA

Name & Address of members of the HUF

Signature of the members of the HUF

1. _____

2. _____

Sureties Name and Address [Mandatory]

Sureties Signature

Date: _____

Place: _____

Signature of notary [With name and seal]

Add additional lines wherever applicable

^(*) = Name of the deceased Karta [Unit Holder]

^(S) = Name of the members of HUF

^(#) = Name of the new Karta