

Letter of Indemnity

**To,
Depository Participant Name
Address**

Dear Sirs,

**Sub: Transmission of securities standing in the name of
Late Mr./Mrs. _____**

I/We hereby inform you that Mr./Mrs. _____ the deceased,
was holding a Client account no. _____ with _____ a
Depository Participant having DP ID _____. The said deceased BO was holding the
following securities:

ISIN	Name of Company	Number of securities

The said deceased died intestate without leaving a Will on the ____ day of _____.

We further inform you that he/she left behind him/her only surviving heirs and next of kin, the following persons according to the Law of Intestate Succession application to him/her by which he/she was governed at the time of his/her death.

- (a) _____
- (b) _____
- (c) _____

We have, therefore, approached you with a request to transfer the aforesaid securities in the name of the undersigned Mr. / Mrs. / Ms. _____ on my/our behalf without insisting on the production of a Succession Certificate or an Order of the Court of competent jurisdiction and you have kindly agreed to do so on my/our executing an indemnity as is herein contained and on relying on the information herein given by us believing the same to be true.

In consideration, therefore, of your having at our request agreed to transfer securities to the name of the undersigned _____, I / we hereby jointly and severely 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, transferring the said securities as herein above mentioned, to the undersigned _____ without insisting on production of a Succession Certificate or an Order of the Court of competent jurisdiction.

IN WITNESS WHEREOF THE said _____ have here unto set their
[Name(s) of applicant(s)]
respective hands and seals this _____ day of _____ of _____.

Signed and delivered by the said applicant(s)

Signature(s) of applicant(s)

Date: _____

Place: _____

(Signature of Magistrate/Notary)

Full Name and Address of Magistrate /Notary:

Name : _____

Address : _____

PIN _____

Registration No : _____

Use space below to affix:

Notarial / Court Fee Stamp	<u>Official Seal of</u> <u>Magistrate / Notary</u>
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Note: This indemnity is to be executed in the presence of a first class or stipendiary Magistrate / Public notary / Judicial.