

# INDEMNITY BOND

In respect of Lost or Misplaced Fixed Deposit Receipt exceeding twelve month period.  
The Citizens' Co-operative Bank Ltd.,  
....., Jammu

Whereas the Citizens' Co-operative Bank Ltd. Jammu B/O ..... issued  
Fixed Deposit Receipt No..... for Rs..... only  
in favour of ..... for .....  
months

And whereas the said Fixed Deposit Receipt has been lost or misplaced and whereas  
upon my/our representation that the said Fixed Deposit Receipt has been lost or  
misplaced and has not been mortgaged, pledged or assigned or dealt with in any  
manner and undertaking that the said Fixed Deposit Receipt is found, it shall be  
returned to you for cancellation and at my/our request, you have agreed to issue a  
duplicate Fixed Deposit Receipt in lieu of the said lost or misplaced Fixed Deposit  
Receipt.

Now I/We ..... (depositor/s).....

(Sureties) in consideration of the promises for ourselves and our respective heirs,  
executors, and administrators jointly and severally agree and undertake from time to  
time and at all times thereafter to indemnify and keep you indemnified from and  
against all claims, demands, actions, liabilities and expenses which may be made or  
taken against or incurred by you by reason of the issue of such duplicate Fixed  
Deposit Receipt or in respect of the said Fixed Deposit Receipt.

No.....dated.....

Dated at ..... this .....day of .....20

To be signed by

## WITNESS/SURETY :

### Signature:

Name.....1. Depositor

Occupation.....2. ”

Address.....3. ”

## WITNESS/SURETY :

### Signature:

Name.....

Occupation.....

Address.....