## **INDEMNITY**

The under signed had purchased/issued from your bank an instrument, full particulars whereof are given hereunder; -

DETAIL OF THE LOST DD/PO/CDR/TDR/SNTDR

	Date of Issue	:	-				
	Nature of Instrument	:					
	Instrument No.	:					
	Amount	:					
	Payee's/Beneficiary's Name	:	·				
	Drawee Branch name	:					
<ol> <li>2.</li> </ol>	It is declared and confirmed on oath that the said instrument has been lost/misplaced/destroyed and neither myself/ourselves nor any one on my/our behalf has encashed/got negotiated/handed over in any legal manner/deal and has not derived any benefit through declaring the same as "Lost".  I / We hereby place on record my / our request you to issue me / us a duplicate instrument solely at my / our						
	risk in lieu of the origing whereof are given above.		lo		for Rs		details
<ol> <li>4.</li> </ol>	I / We hereby uncondition Executives, Managers, Or losses or claims and costs No PPCBL within 15 days of it to claim the amount double I / We further undertake will surrender the same to	fficers, Employee which may arise In this regard, I ts demand witho le the loss accru- that in the event	es, Agents, S in future due / We also u out any recou ed.	uccessors in- e to issuance ndertake to c rse to court c	interest and of duplicate in compensate, keep to be a compensate, keep	assign against all trastrument in lieu of pear and pay entire vise, PPCBL will be e	ypes of original loss of entitled
	IN WITNESSES WHEREOF, I / 20 at		•	our hands this	5	day of	
				Inde	emnifier(s)		
	Name						
				Address			
				Cell No			
	WITNESS:						
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