## **APPENDIX 18**

(Under bye-law no. 34)

## FORM OF INDEMNITY BOND

To be given on Stamp Paper of Rs.200 or to be affixed with adhesive stamps of the same denomination.

(To be given where there are more nominees than one)

I, Shri/Shrimati residing at an Indian inhabitant State as under:
2. Shri/Shrimati
3. The said Shri/Shrimati
4. The said Shri/Shrimati had nominated the following persons under Rule 25 of the Maharashtra Co-op. Societies, 1961.
(I) Shri/Shrimati   (ii) Shri/Shrimati   (iii) Shri/Shrimati   (iv) Shri/Shrimati   (v) Shri/Shrimati
5. I am duly authorised by the above nominees to make an application for membership in the Society. My name appears first in the said nomination Letter.
6. The said Shri/Shrimati died on or about
7. According to the bye-law no. 34 of the bye-laws of the said Society I am entitled to make an application for membership of the said Society and for transfer of the said shares and interest of the said deceased member in the said Flat / tenement

to my name. Accordingly, I have made an application for membership of the said Society and for transfer of the Shares and the interest of the said deceased

member in the said Flat/tenement to my name.

8. I hereby indemnify and keep Indemnified the said Society and its office bearers against any claim, demand, suit or other legal proceedings by other nominee/nominees claiming either lawfully and /or equitably, through the said deceased Shri/Shrimati
I further declare and undertake to bear all expenses, costs, charges in respect of any such claim, demand, suit and/or legal proceedings which may be filed by other nominee/nominees either lawfully and/or equitably claiming through the said deceased member of the Society.
9. I am fully aware of the fact that the Society admits me as its member in place of the said deceased member of the Society only on the basis of the indemnity and undertaking furnished by me.
Signature of applicant
Place:
Date : Signatures of nominees other than applicant 1)
Witnesses:
Names and Addresses of the Witnesses.
(1) Name
(1) Name (1) Signature of the Witness
Place :

Date :