## Appx 'A'

(Ref Stn HQ Umroi letter No 705/Stn/Tpt dt .... Jun 2022)

# FORM OF INDEMNITY BOND

Regarding provision of service transport for the school going children of Offr's, JCOs/OR and War Widows of the Offr's, JCOs/OR and Civilian paid from Defence Service and DAD Staff..

Paste photo of student.

02 x photos att with

To, application The President of India. In consideration of \_\_\_\_\_ minor of whom I am the legal/natural guardian, being carried at my request as a passenger in Indian Army In consideration of

Mechanical Transport in charge of any officer or other rank Army of any other person in the employee of the Indian Army, or any person in the service of the Govt under take and agree that neither in the or nor my exactors of administrators or other legal representatives will make any employee of the Indian Army against any in the service of Govt in respect of any loss of injury to property or person including injuring resulting in death which the said minor May suffer while the said minor is or in consequence of the said minor being so carried or whilst he is boarding or alighting form the said transport and I understand and agree that no compensation will be paid by the Govt by any officer of other rank of employee of the Indian Army or any person in the service of the Govt in respect of any such loss or injury and I further agree so as to bind myself, my heirs, my exactors and administrators to indemnity you and any officer or other rank or employee of the Indian Army and any person in the service of the Govt against you or then or any person of them arising out to any act or default or the said minor during or in connection with such injury in the Indian Army Mechanical Transport.

It is further declared that the stamp duty payable on this undertaking shall be borne by you. Details of family members are as under :-Date:

(Sig of parent/guardian)

### Witness:-

 
 No\_\_\_\_\_\_Rank\_\_\_\_\_Name\_\_\_

 Unit \_\_\_\_\_\_\_Sig \_\_\_\_\_\_
1. No\_\_\_\_\_Rank\_\_\_\_Name\_\_\_\_ 2.

#### **DETAILS OF STUDENT**

Name of the student \_\_\_\_\_ S/o or D/o No \_\_\_\_\_ Rk \_\_\_\_ \_\_\_\_Unit \_\_\_\_ Name Residential Address \_\_\_\_\_ Name of School \_\_\_\_\_ Class \_\_\_\_ Pickup Point

#### COUNTERSIGNED

Station: c/o 99 APO

Dated:

2022