

## Annexure 2

### Indemnity Form

(Note: To be filled on Rs. 100 stamp paper)

I, \_\_\_\_\_ [Name of the Applicant/Official], \_\_\_\_\_ [Designation] having Address / Registered Office at \_\_\_\_\_ have been authorized by Noida Metro Rail Corporation Ltd. to carry out \_\_\_\_\_ [event] on \_\_\_\_\_ [insert date] from \_\_\_\_\_ to \_\_\_\_\_ [insert time].

For my visit to \_\_\_\_\_ (Location Name). I, hereby, indemnify Noida Metro Rail Corporation Ltd., its Representatives and Officials completely against any loss, injury, damage caused to metro commuters, NMRC's men, material & property and to our men & material as well during the said period and undertake to bear all cost incurred as a result of such incidence.

I, hereby, further state that no claims / damages whatsoever shall be made by myself or my representatives against NMRC on the aforesaid context before any court / statutory authorities.

Name of the Applicant/ Official

Stamp/Seal of the Organization

In the presence of:

Sign of Witness 1 \_\_\_\_\_

Sign of Witness 2 \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Time & Date of entry

\_\_\_\_\_

Time & Date of exit

\_\_\_\_\_

(to be filled by NMRC official)

**\*Strike out whichever is not applicable.**