Specimen form of Affidavit (Indemnity Bond)

On Rs. 100/- Non judicial stamp paper duly Notarized

To be filled by the applicant, applying for Enhancement connection

**AFFIDAVIT**

(Indemnity Bond)

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ s/w/o. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, aged\_\_\_\_\_\_\_\_\_years\_\_\_\_\_\_\_\_\_\_occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_residing at door no. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_locality, Hyderabad/Secunderabad, do hereby solemnly affirm and state on oath that:

1. I am the absolute owner of the premises of plot area \_\_\_\_\_\_\_\_\_\_\_\_Sq.Yds and \_\_\_\_\_\_\_\_\_\_floors and got it through Regd. Sale Deed/Gift Deed/Family partition.
2. The connection existing in the premises bearing CAN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_is being used by me or Sri \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Who is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(relationship) and paying the bills regularly for it and there are no dues as on this date for which the enhancement is required.
3. I hereby undertake that there is no case pending in any of the courts regarding title of the premises and that I will not claim the water supply & sewerage connection sanctioned to me as a title deed or claim it to be an evidence in support of claiming the title over the premises, in case of title dispute arises, if any, in future
4. I hereby indemnify against the legal action against the HMWS&SB or to pay any cost or compensation in the vent of HMWSSB being made liable to pay in respect thereof
5. I also undertake to abide by the rules & regulations relating to water supply & sewerage in force from time to time.
6. I will pay the monthly bill amounts regularly without any default.

The contents hereby declared by me are true to the best of my knowledge and in the event of any one of the above is proved to be incorrect or false I shall be liable for departmental and legal actions.  **Deponent**

Witness:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sl. No.** | **Name with father/husband’s name** | **Age** | **Occupation** | **Address** | **Signature** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |

Read over the above contents and after admitting whereof the deponent signed this affidavit on this the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2017, in my presence.

 **NOTARY**