



DECLARATION BY HUF

Please fill in for a HUF

ADROIT FINANCIAL SERVICES PRIVATE LTD.

401-402, 4th Floor, Angel Mega Mall, Plot No. CK-1, Kaushambi, Ghaziabad-201010
Tel.: 0120-4550300-99, Fax : 0120-4550395

DP ID	I	N	3	0	2	8	2	2	Client ID									
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As our HUF firm wishes to open an account with you DP in the said name _____
 we beg to say that the first signatory to this letter, Mr _____
 is the Karta of the Joint Family and other signatories are the adult co-parceners of the said family.

We further confirm that the business of the said joint family is carried on mainly by the said Karta as also by the other signatories hereto in the interest and for the benefit of the entire body of co-parceners of the joint family. We all undertake that claims due to the DP from the said family shall be recoverable personally from all or any of us and also for the entire family properties of which the first signatory is the Karta, including the share of minor co-parceners.

In view of the fact that ours is not a firm governed by the Indian Partnership Act of 1952, we have not got our said firm registered under the said Act.

We hereby undertake to inform the DP of the death or birth of a co-parcener of any change occurring at any time in the membership of our joint family during the currency of the account.

Your's Sincerely

Name & signature of Karta

**Name & Signature of Adult Co-parceners and date of birth of Minor Co-parceners
 (Use Annexure for Additional Members)**

S.No.	Name	Sex	Relation with Karta	Date of Birth	Signature
1.					⊗ _____
2.					⊗ _____
3.					⊗ _____
4.					⊗ _____