

ANNEXURE - V

(PERFORMANCE SECURITY BANK GUARANTEE FORM)

To
The Director,
Karnataka State Natural Disaster Monitoring Centre,
Near Yelahanka-Attur Layout,
Bangalore-560 064.

WHEREAS (Name of the Insurance Agency) has undertaken, in pursuance of Contract No , dated, to provide Group Health Insurance Policy (GHIP) AND WHEREAS it has been stipulated by you in the said Contract that the Insurance Agency shall furnish you with a Bank Guarantee by a recognized Bank for the sum specified therein as security for compliance with the contractor's performance obligations in accordance with the Contract. AND WHEREAS we have agreed to give the contractor a Guarantee: THEREFORE WE hereby affirm that we are Guarantors and responsible to you, on behalf of the contractor, up to a total in Figures Rs., in Words and we undertake to pay you, upon your first written demand declaring the Insurance Agency to be in default under the Contract and without cavil or argument, any sum or sums within the limit of Rs. (Amount of Guarantee) as aforesaid, without your needing to prove or to show grounds or reasons for your demand or the sum specified therein. This guarantee is valid until the three months of the date of expiry.

Signature and Seal of Guarantors

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Date 2018

Address: