## Letter of Indemnity

Date:

To Prime Bank PLC.

\_\_\_\_\_

(hereinafter referred to as "Bank")

Ι ..... son/daughter of ..... holding ..... (country) passport number.....of..... ..... /We (address) \_\_\_\_\_represented by \_\_\_\_\_\_duly authorized by Board Resolution dated with incorporation no. \_\_\_\_\_ and carrying on its business from its (hereinafter referred to as the "Remitter") hereby confirm that registered office at \_\_\_\_\_\_represented by \_\_\_\_\_\_duly authorized by Board Resolution dated with incorporation no. \_\_\_\_\_ and carrying on its business from its registered office at having bonafide relationship with me/us shall act as the facilitator (hereinafter referred to as "Facilitator") with relation to the funds to be deposited/remitted by me/us in a Foreign Currency Account (FC Account) to be maintained by the Facilitator with Prime Bank PLC. ("Bank") as per FE Circular No.19, dated 29 November 2023 and Offshore Banking Act 2024 and any further regulations or circular as published by the Bangladesh Bank from time to time.

I/We also affirm that, the Facilitator is well known to me/us and the details provided by me/us through the Facilitator are absolutely true and no forged, fabricated or untrue details are provided by me/us or the Facilitator.

I/We affirm that all remittance to be sent by me/us will only be through appropriate legal channel which will only be deposited in the IB account held with the Bank.

I/We do hereby indemnify the Bank to the effect that I/we shall bear any kind of losses or damages directly or indirectly, if occurred, for not providing authentic information related to bona-fide relationship with the Facilitator.

In consideration of the services provided by the Bank, I/We hereby agree to indemnify and hold the Bank harmless from any cost, loss or liability arising out of or in connection with the fund to be deposited/remitted in the FC account including but not limited to any dispute, disagreement, or legal action relating to utilization of the funds by the Facilitator, or any loss that may be incurred in connection with any act or omission relating thereto.

I/We hereby declare that all information furnished hereinabove is true and accurate.

Signature	:
Name of the Remitter	:
Contact Number	:
e-mail address	: