



Mr/Ms/M/s (Empanelled Valuer) **TRK Associates**
Address : **39/3, 1st floor, Subhash**
Road, D.Pun

LETTER OF ENGAGEMENT

2. The professional fees Rs (as negotiated within the Bank's prescribed fee structure) shall be paid by the Bank / Borrower within 45 days of the submission of the valuation report and its acceptance by the Bank.

HP/No- 34, Vivant Dental Clinic, Nath
Nagar, Jwalapur, Haridwar

4. Particulars of the assets to be valued :

6. You will also indemnify and keep indemnified the Bank against any loss or damage to any of Bank's information, documents, property, records, or other items while in your use or possession.

7. In addition to the above the Bank reserves the right to adopt any or all of the following course/s of action unless loss/claim, is not attributable to any act, omission or commission of the Valuer or Valuer's Personnel:

(a) depanel and/or remove the name of the Valuer from the list of Valuers on the panel of the Bank

(b) blacklist the Valuer and display the name of the Valuer in the list of blacklisted Valuers

(c) share the information of such depanelment or removal or blacklisting with Indian Banks Association or Insolvency and Bankruptcy Board of India (IBBI) or both

(d) bring such depanelment or removal or blacklisting to the notice of Institute of Chartered Engineers or any other similar professional body or association in which such valuer is a member

(e) Any other means which the bank deems fit for recovery of the amount of actual loss suffered.

8. Please ensure that the valuation report submitted by you to the bank is in uniformity ti the ``Internationally Accepted Valuation Statndards`` as applicable for the respective class of assets.

9. You are required to submit the report in the format prescribed by the Bank within null days from acceptance of this letter and ensure that the valuation report is submitted to the branch only in asealed cover envelope.

Yours faithfully,

For & on behalf of State Bank of India

[Signature with seal]

Place :

Date :

Acknowledged By

[Signature of Valuer]

Place :

Date :

Copy to: (owner of the assets with request to co-operate with the valuer appointed by the Bank).

For & on behalf of State Bank of India

[Signature with seal]

Place: