

B.G. No:

Date of Issue:

B.G. Amount: Rs /-

Date of expiry: (Only for One Year from Date of Issue)

IRREVOCABLE BANK GUARANTEE

We. (Bank Name, Full Address). (Hereinafter referred to as "the Bank") do hereby issue this irrevocable Bank Guarantee at the request, upon application and on behalf of Mr/Miss. **STUDENT NAMES/D/OFATHER NAME** in favour of **SURABHI INSTITUTE OF MEDICAL SCIENCES, Mittapally Village, Siddipet Mandal & District, Telangana State - 502375** represented by its Principal **SURABHI INSTITUTE OF MEDICAL SCIENCES, Mittapally Village, Siddipet Mandal & District, Telangana State - 502375**.

WHEREAS the above named Student got admitted into 1st UG Course for the academic year 2023-24 the duration of the remaining 4 years of the course in the Beneficiary Institute and he/she paid the 1st year fee of **Rs /- (Rupees only)** and is also obligated to pay the fees of **Rs. /-** every year for the remaining period of course. Second year fee payable on or before (as per College Regulations), **Rs. /-**

WHEREAS as per the conditions for admission, the Student is required to furnish an irrevocable Bank Guarantee to the Beneficiary from any Nationalized Bank to protect the interest of the Beneficiary in the event of any default of the Student in payment of balance fee as above during the entire course.

Hence in the event of default on the part of the Student payment of fee of **Rs. /-** per year for 2nd year period i.e. (**as per College Regulations**), **Rs. /-** or any part thereof during the balance course period of PG, the Bank on behalf of the Student hereby irrevocably, unequivocally and unconditionally agrees and undertakes to pay forthwith the said sum of **Rs. /-** or part thereof to the Beneficiary without any condition, protest, demur or proof and without reference to any consent of the Student and irrespective of and notwithstanding any contest/objection from the Student or the existence of any dispute between the Student and the Beneficiary upon the Beneficiary invoking this Bank Guarantee with the Letter of invocation for any part amount of the bank guarantee to the bank. The Bank agrees to make the payment of invoked amount to the Beneficiary simultaneously on the Beneficiary submitting the Letter of invocation for any part amount of the Bank Guarantee.

Not with standing anything contained herein, the bank further under takes to pay the full amount of the bank guarantee to the beneficiary without any reference to the due date of the payment of the fee structure as mentioned in the guarantee, simultaneously on the beneficiary submitting the letter of invocation along with the original bank guarantee.

The Bank further agrees that this Guarantee shall constitute an independent and autonomous contract between the Bank and the Beneficiary and shall not in any way be affected by any dispute or difference between you viz., the Beneficiary and the Student of whatsoever nature.

Finally, the Bank confirms that a mere letter from the Beneficiary that there has been a default on the part of the Student in payment of the fees, shall without any other or further proof be final, conclusive and binding on the Bank to treat the same as a valid invocation along with submission of the original Bank Guarantee for making the simultaneous Payment of the demanded amount up to the maximum of **Rs. /-**.

This Bank Guarantee shall remain in force up to (renewal Date) and all claims should be received by the Bank on or before within three months from the said date

The Bank's liabilities under this guarantee is restricted to Rs, /-(Rupees only) and the guarantee shall remain in force up to dt. (renewal Date) . Unless a claim is made on the Bank within three months from the said date i.e. (renewal Date) all the claims rights and interest etc. Whatsoever of the Institute **SURABHI INSTITUTE OF MEDICAL SCIENCES, Mittapally Village, Siddipet Mandal & District, Telangana State - 502375**.under this guarantee shall be lapsed and shall have no right to enforce this guarantee and the Bank shall be relieved and discharged from all liabilities there from.

Notwithstanding anything contained Herein:

- A. Our Liability under this Bank Guarantee shall not exceed Rs./- (Rupees only)
- B. This Guarantee shall be valid up to renewal Date (Expiry Date).
- C. We are liable to pay the guarantee amount or any part thereof under this Bank Guarantee only and only if you serve upon us a written claim or demand received by us on/or before renewal Date.
- D. At the end of claim period that is on or after _____ all your rights under this guarantee shall stand extinguished and we shall be discharged from all our liabilities under this guarantee irrespective of receipt of original Bank Guarantee duly discharged by bank Dated ___ day of _____ for (BANK NAME). For (BANK NAME).

Manager (Credit)
(BANK NAME) (Stamp & Signature)

Chief Manager
(BANK NAME) (Stamp & Signature)

Date:

For Confirmation of the Guarantee Please Contact At the Following Address:

E-Confirmation Cell

BANK NAME ,FULL ADDRESS& DETAILS Contact Number, Email Address