

FORM O-10

[See rule 8D]

Report of valuation of life interest, reversions and interest in expectancy

ALL QUESTIONS TO BE ANSWERED BY THE REGISTERED VALUER. IF ANY PARTICULAR QUESTION DOES NOT APPLY TO THE ASSET UNDER VALUATION, HE MAY INDICATE SO. IF THE SPACE PROVIDED IS NOT SUFFICIENT, DETAILS MAY BE ATTACHED ON SEPARATE SHEETS

Name of registered valuer _____ *Registration No.* _____

1. Purpose for which valuation is made
2. Date as on which valuation is made
3. Particulars of the person whose interest is valued-
 - (a) Name and address
 - (b) Date of birth
4. Exact nature of the interest
[Attach copy of the trust deed, will, etc., under which the interest is derived]
5. Particulars of the life tenant ____
 - (a) Name and address
 - (b) Date of birth[If there are two or more life tenants, give particulars of each]
6. Full particulars regarding the present state of the trust fund including ____
 - (a) full details of the assets, including advances to beneficiaries to be brought into account on distribution
 - (b) full details of all liabilities to be met from the fund
 - (c) income of the fund
7. Computation of the estimated value of the life tenant's/reversioner's share of income/state, indicating the margins adopted and, where applicable, the rate of estate duty assumed in arriving at the estimate
[Attach certificates/valuation reports on which the estimate is based]
8. Valuation formula and the assumptions made regarding
 - (a) mortality
 - (b) interest
9. Other remarks, if any
10. Value of interest arrived at by the actuary

11. I hereby declare that ____
 - (a) the information furnished above is true and correct to the best of my knowledge and belief;
 - (b) I have no direct or indirect interest in life interest/reversions/interest in expectancy which is valued.

Date _____
Place _____

Signature of registered valuer

