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.		ution 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 includ	ing	
	(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		
10.	value of interest affived 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			
Plac		Signature of registered v	valuer