To Insurance Regulatory and Development Authority of India Parishram Bhavan, Basheerbagh Hyderabad-500 004

Sir,

I hereby submit my application for 'Categorisation of the Surveyors Licence under Regulation 6 of the INSURANCE SURVEYORS AND LOSS ASSESORS (LICENSING, PROFESSIONAL REQUIREMENTS & CODE OF CONDUCT) (AMENDMENTS) REGULATIONS 2013 along with the following documents :

- a) Certificate issued by IRDA with details of 'Departments and Category' assigned in 2001.
- b) Certificate issued by IRDA with details of 'Additions in Departments' since 2001.
- c) Copy of the Categorisation Letter issued by IRDA at the time of grant of License by IRDA.

1	Title						(State Mr / Mrs/ Miss)
2	Name				Mention FULL NAME		
3	Fathers / Husban	ıds			Mention FULL NAME		
	Name						
4	Address for		House				
	Correspondence		Stree				
			Street				
			Town Distri				The address mentioned here
			State:				will be used for all mail /
			Pin Co				email correspondences by
				hone No.	STD Code		the Authority
			Mobil		012 0040		
			Email				
5	Permanent addre	ess	House	e No.			
			Stree				
			Town				
			Distri				
			State:				For Records
			Pin Co				
6	Date of Birth		Telep	hone No.	STD Code		DD-MM-YYYY
7	Age as on date						As on date of application
8	Nationality					Sex	ns on date of application
	*		SLA Number:				
9	Surveyors licence	e details	Date of Expiry:				Day- Month-Year
10			Details of Surveyors Licence held				
							DD-MM-YYYY
Date	of Issue of First Li	cence	Particulars of Renewal of Licence				
				Particulars of R	enewal of Licence	e	
	Date of	Date	of	D			Was the License NOT
Sl	renewal of	expiry	y of	Duration	Was there an	-	renewed for any period?
No	License	Licen	ise	of Licence	during the Licer	ising period	(Mention particulars with
i					1		reasons)
ii							
iii							
iv							
v							
vi							
				Attach copies of t	he Previous licen	ce	
Pan c	ard No				Aadhar No		

1



APPLICATION FOR CATEGORISATION OF SURVEYORS. (APPLICATION UNDER REGULATION 6 OF THE INSURANCE SURVEYORS AND LOSS ASSESORS (LICENSING, PROFESSIONAL REQUIREMENTS AND CODE OF CONDUCT) (AMENDMENTS) REGULATIONS 2013)

11		Departments of Operation:								
De	partment	Fire	Marine	Marine	Engineering	Motor	Miscellaneous	CROP	LOP	
			cargo	Hull				Insurance		
Please 7	ГІСК Against									
the Dep	artment									
Categor	ry Allotted									

12	Employment Details									
Name of the Firm	Period Period (Insurance / Surveyor /		Nature of Work Undertaken (SLA / Investigation / Professional etc)							

13 E	ducational & Professional Qualifica	tions.			
	Qualifications	Name of the Exam	Year of	University /	Subject and
		passed	passing	Institute	Duration of course
Academi	ic Qualifications (1)				
Academi	c Qualifications (2)				
Academi	c Qualifications (3)				
Professio	onal Qualifications (1)				
Professio	onal Qualifications (2)				
Professio	onal Qualifications (3)				
Technica	al Qualifications (1)				
Technica	al Qualifications (2)				
Technica	al Qualifications (3)				
· ·	jualifications as stated in 64 UM ance Act 1938				
	jualifications as mentioned in nsurance Rules 1939				
	ualifications as mentioned in the rs Regulations 2001 and 2003.				
#1	# Attach all relevant certificates				

	Details of participation in Conferences / Seminars / Workshops conducted by IIISLA.									
14	(Refer Regulation 6 – Training Examination – Seminars – Workshops)									
Co	nferences / Seminars /	Mention Name of	Date of	Duration of the	Remarks					
	Workshops	the Conference /	Conference/	Conference	(Attach					
		Seminar/Workshop	Seminar/Workshop	(Mention in hours)	Participation					
			(DD-MM-YYYY)		Certificate)					
Details	s of participation in									
Confer	ences organised by IIISLA									
Details	s of participation in									
Semina	ars organised by IIISLA									
Details	s of participation in									
Workshops organised by IIISLA										
Mentio	Mention the total hours of participation in Conferences									
Mentio	Mention the total hours of participation in Seminars									
Mentio	Mention the total hours of participation in Workshops									

APPLICATION FOR CATEGORISATION OF SURVEYORS. (APPLICATION UNDER REGULATION 6 OF THE INSURANCE SURVEYORS AND LOSS ASSESORS) (LICENSING, PROFESSIONAL REQUIREMENTS AND CODE OF CONDUCT)(AMENDMENTS) REGULATIONS 2013)

15. G	ive particulars of exams conducted by the Insurance	e Institute of India or any examination body, which has
	cleared by the applicant: (Refer Regulation 6 – Trai	
i	(a) Name of Examination Body	
	(b) Name of the Course:	
	(c) Centre of Examination:	
	(d) Date of Passing:	
ii	(a) Name of Examination Body	
	(b) Name of the Course:	
	(c) Centre of Examination:	
	(d) Date of Passing:	
iii	(a) Name of Examination Body	
	(b) Name of the Course:	
	(c) Centre of Examination:	
	(d) Date of Passing:	
iv	(a) Name of Examination Body	
	(b) Name of the Course:	
	(c) Centre of Examination:	
	(d) Date of Passing:	
16	Whether the applicant was any time suspended /	
	debarred by any insurer / organisation,	
	If YES please furnish fill details	
17	Please indicate the number of years you have	Less than 8 years
	been working as a surveyor	8 – 16 years
	(Tick appropriate Box)	More than 16 years
18	Category of Member granted by the IIISLA	Fellow
	(Tick appropriate Box)	Associate
		Licentiate

I hereby solemnly declare that-

- (a) All the particulars mentioned in this application are correct and true
- (b) I have not been found to be of unsound mind by a court of competent jurisdiction;
- (c) I have not been found guilty of criminal misappropriation or criminal breach of trust or cheating or forgery or an abetment of or attempt to commit any such offence by a court of competent jurisdiction;
- (d) I have not been found guilty of or to have knowingly participated in or connived at any fraud, dishonestly or misrepresentation against an insurer or an insured in the course of any judicial proceeding relating to any policy of insurance or the winding up of an insurance company or in the course of an investigation of the affairs of an insurer; and
- (e) I have not violated the code of conduct specified under Regulations made by the Authority.
- (f) I posses the requisite qualifications and training as prescribed by the Authority.
- (g) I have passed such examination as specified in the regulations by the Authority.
- (h) I enclose the following documents in support of my Qualifications / KYC etc.

<u> </u>	
i	Documents in proof of educational Qualification
	(Degree/Diploma/Technical / Professional etc.)
ii	Documents in support of passing the III Exams
iii	Document in support of the age
iv	Documents in support residential proof
v	PAN Card
vi	Copy of the Membership Certificate issued by the Institute
vii	Certificate indicating the 'Departments and Category' assigned at the time of
	earlier categorisation
viii	Copy of the Categorisation Letter issued by IRDA at the time of grant of
	License.
xi	Copy of training completion certificate from Insurance institute or any other
	recognised institute
х	Copy of the certificates issued by IIISLA for Seminars/Trainings/Workshops
xi	Recent photo - TWO
Note	All documents mentioned above should be attested when the application is submitted.



APPLICATION FOR CATEGORISATION OF SURVEYORS. (APPLICATION UNDER REGULATION 6 OF THE INSURANCE SURVEYORS AND LOSS ASSESORS (LICENSING, PROFESSIONAL REQUIREMENTS AND CODE OF CONDUCT) (AMENDMENTS) REGULATIONS 2013)

Note:

- a) Any changes in the information submitted to the Authority should be conveyed to the Authority, within FIFTEEN days of such change.
- b) The license issued by the Authority (in original) shall be surrendered at the time of application for grant of modified license.
- c) Attention of the applicant is drawn to Section 102 of the Insurance Act 1938 which provides that who ever in any document required for the purpose of any provisions of the Act, rules or regulations made there under, fails to furnish the same shall be liable to penalty not exceeding **Rs 5 lakhs for** each of such failure and punishable with fine.

The Category up-gradation for which I apply will be used only by myself for Survey and loss Assessment work for the category for which the up-gradation is granted by the Authority.

Date

:

Place :

Signature of Applicant

Name _____ Address :-

APPLICATION FOR CATEGORISATION OF SURVEYORS. (APPLICATION UNDER REGULATION 6 OF THE INSURANCE SURVEYORS AND LOSS ASSESORS) (LICENSING, PROFESSIONAL REQUIREMENTS AND CODE OF CONDUCT)(AMENDMENTS) REGULATIONS 2013)

Certification by the IIISLA

Details of the SLA & Licence Details :

1.	Name of the SLA				
2.	SLA License Number				
3.	SLA License issued from				
4.	SLA License valid up to				
5.	Category of SLA				
6.	Service of SLA				
	(Service should be 'IN-CHAIN' -There should be				
	NO Discontinuity in service)				
7.	Membership No. of IIISLA				
8.	Category Approved by IIISLA for up-gradation				
9.	Details of Seminars / Workshops / Conferences attended by the applicant as per records of IIiSLA				
	(Refer Regulation 6 – Training Examination – Seminars – Workshops)				

Conferences / Seminars / Workshops	Mention Name of the Conference / Seminar / Workshop	Date of Conference / Seminar / Workshop (DD-MM-YYYY)	Duration of Conference (Mention in hours)	Remarks (Attach participation certificate)
Details of participation in				
Conferences organised by IIISLA				
Details of participation in				
Seminars organised by IIISLA				
Details of participation in				
Workshops organised by IIISLA				
a) Mention the total hours of parts				
b) Mention the total hours of parts				
c) Mention the total hours of parts				

Educational / Professional Technical Qualifications as per IIISLA Records

(Refer Regulation 6 – Training Examination – Seminars – Workshops)							
Qualifications	Name of the Exam	Year of	University / Institute	Subject and Duration of			
	passed	passing		course			
Academic Qualifications							
Professional Qualifications (1)							
Professional Qualifications (3)							
Technical Qualifications (1)							
Special qualifications as stated in							
64 UM of Insurance Act 1938							
Special qualifications as mentioned							
in 56 A of Insurance Rules 1939							

Certificate:

Date: Place

- a) We hereby declare that all the particulars mentioned in the application are verified by and found to be correct and true.
- b) We hereby declare that the Surveyor and Loss Assessor has been fully trained on the Code of Conduct and the Terms and Conditions mentioned therein.
- c) The candidate has been awarded Fellowship / Associate-ship / Licentiate / Student vide membership Number of the IIISLA

Name Designation

Notes and Instructions

- 1. An individual can apply for Category Up-gradation under any one of the categories, which will entitle him to undertake the work under the selected category.
- 2. The application and the Certificate by IIISLA should be filled in, as far as possible, in Hindi language or English language.
- 3. There should be **NO CORRECTIONS / OVERWRITING OR ALTERATION** made in any answer to the questions in the application.
- 4. The applicant must furnish all the documents called for with the application.
- An applicant shall furnish the proof of Educational Qualification, Professional Qualifications Technical Qualifications / Attendance of Seminars / Conference / Workshops conducted by IIISLA as mandated in the regulations.
 (Refer Regulation 6 – Training Examination – Seminars – Workshops)