

भारतीय बीमा संस्थान

Insurance Institute of India

G-Block, Plot No.C-46 Opp. American Consulate, Bandra Kurla Complex, Mumbai – 400 051.

www.insuranceinstituteofindia.com

APPLICATION FORM FOR INSURANCE SURVEYORS EXAMINATION

Roll N	0.	. & Date	Two Photograph					
(If you are fresh candid blank else write Roll N 1. Name:	o. allotted					Photos atta	e recent graph and ch one graph with	
2. Address:							form.	
				Pin code:				
3. Qualification: a) Academic / Professional: b) Insurance: 4. Communicati a) Telephone: b) Fax: c) E-mail:						· · · · · · · · · · · · · · · · · · ·		
6. Preference of Exam Centre: (1) (2)								
7. Subjects opted A: Section-I	· · · · · ·	(Compulsor	y for all traine	es)				
B: Department of Departments	FIRE	examination: MARINE CARGO	MARINE HULL	ENGG.	MOTOR	MISC.	L.O.P.	
Please Tick								
favour of 'Insu		n fee Rs.250/- and titute of India, pay			00/-, payable by De	emand Draft or	nly drawn in	
B. Payment detail: Demand Draft Num	ıber	Date		Amount (Rs)		Name of Bank		
Practical Training D	etails:							
Name of the Surveyor/Surveyors Firm	Depar to the	tments allocated Surveyor/ yors Firm	Category allocated to the Surveyor/Surveyors Firm		Period of Trainin undergone (Pleas mention dates)	e under wh	Name of persons under whom training is undertaken	
Signature of Application	ant)					(Signoture of	Trains	
0. If you have a Sur		ense issued by the	he Authority (IRDA), pleas		(Signature of	ташег)	

