

# Agent Application Form

 Application Type : New  Transfer 

URN NO : \_\_\_\_\_

 Channel Type : Agency  Motor 

Branch Name: \_\_\_\_\_

Branch code: \_\_\_\_\_

Paste color  
passport size  
photograph only

Complete signature of candidate

Paste self attested  
passport size  
photograph only

- While providing signature, please ensure that the sample signature is made within the space provided
- When pasting the photograph, please ensure that the photograph is pasted exactly in space provided
- Please note that the application would not be accepted if above two points are not adhered to

FORM I-A/B

APPLICATION FOR APPOINTMENT TO ACT AS AN INSURANCE AGENT

(with a life insurer OR general insurer OR Health insurer)

To,

**Raheja QBE General Insurance Limited.**  
 Ground Floor, P&G Plaza, Cardinal Gracious Road,  
 Andheri -East, Mumbai 400099- India

Dear sirs,

I request that Appointment to act as an insurance agent of your organization may be granted to me.

I herby declare that particulars given below are true and that the APPOINTMENT for which I apply will be used only by myself for soliciting or procuring insurance business for your insurance organization.

- 1) Name: \_\_\_\_\_
- 2) Title: state 1 if are Mr.: [ ] 2 Mrs.[ ] 3 Miss [ ]
- 3) Father's/Husband's Name: \_\_\_\_\_
- 4) Full address: \_\_\_\_\_

House No	
Street	
Town	
District	
State	
Pin code	
Mobile no	
Email id	
<b><u>Aadhar Number</u></b>	
<b><u>PAN Number</u></b>	

5) Date of birth (DD/MM/YYYY) \_\_\_\_\_ Attach age proof :

6) Education qualifications. (Tick the right box)

Class X  Class XII  Graduation  Post Graduation  Others

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7) Give particulars of pass in pre-recruitment test conducted by the insurance institute of india or any other examination body:

Name of the examination body	
Candidate's name	
Candidate's number	
Centre of examination	
Name of the exam passed	
Date of passing	

8) Furnish the details of any insurance agency in force or ever held by applicant:

Name of the insurer	Agency code number	Date of Appointment as an agent	Date of cessation of agency	Reason for cessation of agency

\*please attach agency cessation letter issued by the insurer

10) Details of other insurance related activities undertaken, if any:

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11. I declare that---

- a) I have not been found to be of unsound mind by a court of competent jurisdiction
- b) 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 court of competent jurisdiction
- c) I have not been found guilty of or to have knowingly participated in or connived at any fraud, dishonesty or mis-representation.
- d) I am not involved in any insurance intermediation business other than as proposed under this Application
- e) I shall abide by the policies and procedure(s) of the Company and code of conduct as prescribed by Insurance Regulatory & Development Authority of India (IRDAI) from time to time at all times and shall not indulge in any unfair activities including corruption, money laundering etc
- f) I am aware about the provisions relating to rebating and shall not involve myself in any such activities, which amounts to rebating as per Insurance Act 1938 as amended from time to time

Date: \_\_\_\_\_

Yours faithfully

Place: \_\_\_\_\_

\_\_\_\_\_  
(Signature of applicant)

Notes and instructions

1. The application should be filled in Hindi or English language
2. Any alteration or correction made in any answer to the questions in the application should be initialed by the applicant.
3. An applicant must be at least 18 years and above of age on the date of the application. The applicant shall furnish the proof of age
4. An applicant shall furnish the proof of pass in the pre-recruitment exam conducted by an examination body duly recognized by the insurance regulatory and development authority of India.
5. The following document should be attached with the application as per checklist on last page of the application form.

### Candidate Personal Details

1. Gender      Male  Female

2. Marital Status : Single  Married       If Married, Anniversary Date : \_\_\_\_\_

3. Basic Qualification: \_\_\_\_\_      Roll NO \_\_\_\_\_      Board Name \_\_\_\_\_

4. Highest qualification \_\_\_\_\_

5. GST Number (Optional) \_\_\_\_\_

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6. Have you ever been associated with Raheja QBE General Insurance Company Limited? Yes  No

If yes please specify \_\_\_\_\_

12. Are you a relative of any employee of Raheja QBE General Insurance Company Limited? Yes  No

If yes furnish name & relationship \_\_\_\_\_

13. Are you eligible for tax exemption under section 10(26) pr 10(26AAA) of Income Tax Act, 1961? Yes  No

If yes, please attach the proof.

14. Are you Politically exposed person? Yes  No

## Training and Examination details

Training mode: online  offline  Location (city) \_\_\_\_\_ Institute \_\_\_\_\_

Examination mode: online  Body: NSEIT  Other \_\_\_\_\_

Location \_\_\_\_\_ Language \_\_\_\_\_ Exam date \_\_\_\_\_

## Relationship Manger details/signature And Checklist of Documents Submitted

I certify that I have personally interviewed the applicant & conducted the applicant profiling & confirmed that the details mentioned in the agent application form is correct. The answers given in the application are true and correct to the best of my knowledge and applicant is suitable to become an agent with Raheja QBE General Insurance Company Limited.

I hereby declare that Mr./Mrs./Ms. \_\_\_\_\_ has been referred by me needs to be directly assigned to Raheja QBE General Insurance Company Limited office \_\_\_\_\_ In my team.

RM Name \_\_\_\_\_ Employee Code \_\_\_\_\_

ASM Name \_\_\_\_\_ RM Name \_\_\_\_\_

Branch \_\_\_\_\_ Branch \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_

## CHECKLIST OF DOCUMENTS TO BE ATTACHED TO THIS FORM

Documents to be submitted by Prospective Agent...Original copy should be presented for verification at the time of submission of this form.

1. Age Proof : Passport / Birth Certificate / Driving License / PAN Card
2. Address Proof: Passport / Ration Card / Driving License / Electricity Bill / Telephone Bill
3. NOC for Address Proof : (Only in case the address is not in Self Name - Restricted to Spouse and Father only)
4. Educational Proof: ; minimum Std. XI Pass (Marksheet/relevant board/university certificate)
5. Pan Card Copy
6. Photographs 2
7. Agency Agreement
8. Copy of Current insurer cessation certificate - For transfer case
9. Cancel cheque copy - for NEFT transfer