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FACULTATIVE REINSURANCE BUSINESS (PREMIA)

(Not to be used if settlement for Premia and Claims is made on an account basis)

To,
The State Bank of Pakistan,
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Dear Sirs,

In support of our application on Form 'M' (enclosed) for the remittance of
to we make the following declaration:- (amount of currency)
(Country)

1. (a) Date and place of issue of reinsurance Policy
- (b) A certified copy of the reinsurance acceptance note endorsed
2. The currency in which reinsurance is effected
3. Name and address of the beneficiary
4. Whether the applicant Company has been registered in Pakistan under the Insurance Act

We undertake to receive payment of any claim under the reinsurance through an Authorised Dealer in Foreign Exchange. We also certify that the requirement of compulsory reinsurance with the Pakistan Insurance Corporation to the extent of 30% has been complied with.

For and one behalf of

Name and address in Pakistan of the applicant Company.

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Country of Incorporation

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(Stamp and Signature of the Insurance Company)

Date