

ANNEXURE I

Insurer Information Sheet

1. Name of the Insurer :
2. Office Address :
3. Office Contact Number :
4. Company Email ID :
5. Website :
6. PAN Card Number :
7. GST Registration Number :
8. Contact Number of the Proprietor :
9. Proprietor Email ID :
10. Nature of Current Business/Trade : Manufacturer/Distributor/Service Provider
11. Year of establishment :
12. EMD Particulars :
13. **Key Contacts**
 - a) Service Contact No : Email Id :
 - b) Alternate Contact No: Email Id :
14. **Business Financials.**
 - a) Turnover during last three years:
 - 1)
 - 2)
 - 3)
 - b) Tax / GST paid during last three years:
 - 1)
 - 2)
 - 3)
15. **Bank details of Insurer:**
 - a) Name of A/c Holder :
 - b) Bank Name :
 - c) Branch Name :
 - d) A/c Number – SB or CA :
 - e) IFS Code :

Signature of the Insurer