

(All the new applicants applying for membership are required to submit the below mentioned affidavit on Indemnity Bond Paper of Rs 20/- duly notarized and enclosed it with the application)

AFFIDAVIT

I.....S/O.....ageyrs
having SLA license No..... and IISLA Membership No.....(if allotted)
hereby declare with full knowledge. I sincerely state on oath and undertake as follows -

1. That I am a licensed Surveyor and loss Assessor by IRDAI and member of IISLA / Applied for membership of IISLA.
2. That I will conduct my duties and functions in an Independent, fair, impartial and transparent manner whether in personal capacity for jobs assigned to me or my Firm/Company by Insurer or Insured as per membership level/category of IISLA and Department allocated by IRDAI to me within the purview of the applicable Rules and Regulations .
3. That I will also not get involved directly or indirectly with any contract survey / outsourcing of survey jobs including training to employee surveyor of any insurance company.
4. That opposite action of above by me will attract punishment to me as well as to that Firm/Person/Company who sought service from me.
5. That I shall abide by all duties, responsibilities, code of conduct and ethics of IISLA as they now are, or as they may hereafter be altered time to time and will maintain absolute integrity and utmost devotion to my duty and profession.
6. That I shall abide by the rules, regulations, bye-laws notifications and guidelines under Memorandum and Article of Association of IISLA and I will accept the decisions of the Council in all matters dealt with by them time to time.
7. That I affirm that I possess all the necessary qualifications required to become a member of IISLA and the documents produced in such proof are genuine and if any discrepancy is found, I agree that IISLA may take all appropriate action against me and shall have the power to remove me from the register of Membership as per AOA & regulations of IISLA
8. That I undertake to intimate in advance to IISLA in the event of discontinuing my independent practice as an Insurance Surveyor and Loss Assessor and I shall voluntarily surrender my membership, in the event of discontinuing independent practice as an Insurance Surveyor and Loss Assessor / obtain permission of IISLA in the event if I join as director/partner of any licensed firm/ Co of SLAs.
9. That I agree that if I fail to surrender my membership in the event of discontinuing my independent practice as an Insurance Surveyor and Loss Assessor, IISLA is entitled to remove my name from membership register permanently .
10. That in the event of going for an employment in any Insurance Companies or any other Industry or Firm without surrendering my Membership, the Institute is at liberty to remove my name from the membership register permanently.
11. That I will possess a valid Insurance Surveyor and Loss Assessor License issued by IRDA and I agree to keep it alive during my period of membership with IISLA.
12. That I, further undertake that in the event of my desire to resign from my membership of the Institute or if I am suspended or expelled from the Membership, I will pay all the dues if any and to return Membership Certificate and Identity Card to the Institute.

Solemnly affirmed that the above undertaking affidavit is made with free will and on my own volition upon fully understanding each and every statement therein.

Witness my hand thisday ofyear 2015

Place :

Signature of the Deponent