



# INDIAN INSTITUTE OF INSURANCE SURVEYORS AND LOSS ASSESSORS

(Promoted by IRDA, Govt. of India)

Head Office:-315,Paras Chambers,D.No.-3-5-890,HimayatNagar, Hyderabad-500029(TS)

e-mail : iisla.ad2013@gmail.com, admin@iisla.co.in, Web-site : www.iisla.co.in.,

Telephone Numbers: 040- 66253666, 040-23261072, 040-23261073.

Dear Member,

31.03.2016

## Re: Notice of Subscription for the year 2016-17

This is to inform you that the proposal of "IISLA Benevolent Fund" placed before the Extra Ordinary General Meeting conducted at Kanpur (U.P.) on 26.03.2016 was passed unanimously. Furthermore, in council meeting held on the same day at Kanpur it was decided to adopt the resolution and constitute the "IISLA Benevolent Fund" and form the administrative body for the "IISLA Benevolent fund".

In view of the resolution passed it is being informed that the members are required to include the following amount in addition to the IISLA annual subscription dues for the Financial Year 2016-17 and onwards.

<b>One time admission fee for IISLA Benevolent Fund</b>	2000.00
Annual subscription towards IISLA Benevolent Fund	1000.00
<b>Total</b>	<b>3000.00</b>

Hence you are advised to send your outstanding subscription dues along with Rs. 3000.00 by way of at par cheque or Demand Draft drawn in favour of "Indian Institute of Insurance Surveyors and Loss Assessors" OR "I I I S L A" payable at Hyderabad and send the same to the below mentioned Administrative Office Address:

**Indian Institute of Insurance Surveyors and Loss Assessors**

**#315, Paras Chambers,**

**D. No. 3-5-890,**

**Himayath Nagar, Hyderabad - 500029.**

**PLEASE NOTE THAT NO OTHER MODE OF PAYMENT i.e. CASH/NEFT/DIRECT TRANSFER etc WILL BE ACCEPTED**



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For the convenience of members net amount payable for each level of membership is given in a table below-

Level of membership	IISLA annual subscription 2016-17 (Rs.)	One time admission fee for IISLA Benevolent Fund(Rs.)	IISLA Benevolent Fund annual subscription 2016-17(Rs.)	Total (Rs.)
Licentiate	1000	2000	1000	4000
Associate	1500	2000	1000	4500
Fellow	2000	2000	1000	5000

For any query, members are requested to contact IISLA admin office.

With regards

Lalit Gupta

President (IISLA)

# **IIISLA BENEVOLENT FUND**

## **RULES & REGULATIONS**

**1-NAME OF THE FUND** : **IIISLA BENEVOLENT FUND**

**2-ADMINISTRATIVE OFFICE:** Administrative office of IIISLA situated at Flat No.315, Paras Chambers, Door No.3-5-890 Himayath Nagar, Hyderabad or any other place as authorized by the central council of IIISLA.

**3-COMMENCEMENT OF THE FUND:** The fund shall come into existence on 01<sup>st</sup> April, 2016 and shall last till the existence of IIISLA.

### **4-ELIGIBILITY FOR MEMBERSHIP:**

**A)**-All valid IIISLA Members attaining the age of 70 years as on 01-04-2016 subject to an application on prescribed format as provided by the central council of IIISLA, shall become the member of this fund. A self attested photocopy of proof of age is to be enclosed with application form.

**B)**-No valid IIISLA member is eligible for membership of this fund if his age is or exceeds 70 years as on 01-04-2016.

**C)**-The membership of fund is mandatory for all IIISLA members, below 70 years as on 01-04-2016.

**D)**- Any valid IIISLA member not attaining the age of seventy as on 01-04-2016 should apply for the membership during the calendar year. However the coverage will start after thirty days from the receipt of cheque/demand draft at IIISLA administrative office.

### **5-MEMBERSHIP CONTRIBUTION:**

**A)**- Each member shall contribute to one time Admission fee of Rs. 2,000/- (Rs. Two Thousand only) in addition to the annual subscription of IIISLA.

**B)**- Annual subscription fee for Benevolent Fund shall be Rs. 1000.00(Rs .One Thousand only) which will be payable along with the annual subscription of IIISLA.

### **6- MODE OF PAYMENT FOR IIISLA BENEVOLENT FUND:**

**A)**-The cheque / Demand Draft is to be made in the name of "IIISLA" payable at Hyderabad. On the back of the cheque/Demand Draft "IIISLA membership No." must be mentioned.

**B)**- Members exceeding age of 70 years as on 01-04-2016 need not to give a cheque or demand draft for Admission Fee and annual subscription of IIISLA Benevolent Fund.

### **7-AIMS & OBJECTS OF THE FUND:**

**A)**-To extend succor to the legal dependents/nominee of the members in case of natural death & listed critical illness of the members up to an age of 70 years as per birth certificate / high School certificate or any other valid and legal age proof.

**B)**-Members crossing 70 years of age will continue to be member of the fund with limited benefit for the treatment of the following specific critical diseases only;

- I)- Lever Cirrhosis
- II)-Cancer
- III)-Kidney transplant
- IV)-Liver Transplant
- V)-Heart Bypass surgery

Or any other critical ailment as suggested and approved by the administrative body of fund from time to time.

#### **8-MANAGEMENT OF THE FUND:**

**A)**-The fund so collected will be deposited in a separate bank account opened for the purpose in any nationalized bank with the title "IISLA BENEVOLENT FUND."

**B)**- Fund to be invested in fixed deposits in a scheduled nationalized bank only.

**C)**- The fund collected for admission fee and annual subscription in no case shall be spend for any activity other than compensation in case of natural death of the member or critical illness as described in **7 B)** above.

**C)**-There shall not be any cash transaction in "IISLA BENEVOLENT FUND" bank account.

**D)**-Fund management expenses shall be borne by IISLA Council.

**E)**-The accounts of "IISLA Benevolent Fund" will be displayed on IISLA web portal under heading "IISLA BENEVOLENT FUND" from time to time.

**F)**-The accounts of 'IISLA Benevolent Fund' will be audited by external auditor other than IISLA external auditor. The annual audit report will be displayed on IISLA web portal.

**G)**-The Office bearers of the Fund shall be approving and recommending authority. Signature of either president or secretary of IISLA Benevolent Fund is mandatory in recommendation letter. On recommendation received by the President/Secretary of the fund the IISLA Authorised signatories will issue a cheque in the name of the person whose name has been recommended.

#### **9-GENERAL BODY OF THE FUND:**

All members forming the "IISLA Benevolent Fund" shall constitute General Body. To minimize expenses in the fund any General Body Meeting of IISLA will hold good for the General Body Meeting of 'IISLA Benevolent Fund'.

#### **10-ADMINISTRATION OF THE FUND:**

**A)**-Administrative body comprising of following:-

1. PRESIDENT
2. SECRETARY
3. TREASURER
4. EXECUTIVE MEMBER

5. EXECUTIVE MEMBER
6. EXECUTIVE MEMBER
7. EXECUTIVE MEMBER

**B)-**The administrative body shall comprise of two present council members and one IISLA member for the post of President, Secretary and Treasurer as nominated by IISLA central council. Four executive members will be nominated from each zone.

**C)-**The tenure of the administrative body will be for one year (365 Days) from the date of formation, irrespective of the tenure of council members in IISLA.

**D)-** The members/office bearers can use their designation and stationary only for the purpose related to Fund and nowhere else.

**E)-** All the posts of administrative body are honorary and no re-imbusement will be given to any one in any case from IISLA Benevolent Fund. However if deemed necessary IISLA council may call any office bearer or executive member of fund for meeting/discussions. Such expenses will be borne by IISLA.

#### **11-AMENDMENT TO RULES:**

No amendment could be done in basic framework until unless approved by central council on the recommendation of administrative body of Benevolent Fund.

#### **12-DISPUTES AND ANCILLARY MATTERS:**

All disputes with regard to administration of the FUND shall be initially taken up by the administrative body of fund. In case if it is not resolved then central council will decide the matter on merit.

#### **13-BENEFICIARY AMOUNT:**

**A)-**In case of natural death the legal heir/nominee will get Rs. 5,00,000.00 (Rs. Five Lac only)

**B)-**In case of any critical illness { as defined in 7 B) above } to the member actual medical expense incurred up to maximum Rs. 2, 00,000.00(Rs. Two Lac only) will be reimbursed.

**C)-** Benefits of critical illness are available only once during the entire period of membership.

#### **14-DONATIONS TO FUND**

Public donations are accepted only by cheque or Demand draft and its receipt will be issued by administrative office only.

#### **15)-DISSOLUTION OF FUND**

In case the fund gets dissolved for any purpose the entire fund amount will be evenly distributed to its valid member as on date.

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## **NOTICE : Formation of Administrative Body for IIISLA BENEVOLENT FUND**

Pursuant to the council meeting on 26.03.2016 at Hotel K.D. Palace, Kanpur(U.P.) and adoption of Extra Ordinary General Meeting (EGM) resolution for formation of "IIISLA Benevolent Fund" and its administrative body it was resolved that following members will constitute administrative body of the fund with designation as followed:

-

1. Mr. Ashok Kumar – President
2. Mr. J.C.Joshi –Secretary
3. Mr. Prakash Chandra Kimtee –Treasurer
4. Mr. P.C. Shukla (North Zone)
5. Mr. J.P. Singh (East Zone)
6. Mr. S.Upendra (South Zone)
7. Mr. Jagdish Parmar (West Zone)

For Indian Institute of Insurance Surveyors and Loss Assessors

(Lalit Gupta)  
President

Date: 31.03.2016



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Himayath Nagar, Hyderabad - 500029, Phone. 040-66253666

## ADMISSION FORM - IIISLA BENEVOLENT FUND

To be filled in capital letters and with black ink

1	Name of member	
2	Address of correspondence	
3	Mobile/Tel Nos	
4	E-Mail id	
5	IIISLA membership Number	
6	SLA No.	
7	Date of Birth	Enclose proof of age
8	Cheque /DD details	

### Nominee for compensation

9	SL NO	Name	Gender Male/Female	Date of Birth	Relation	% share
	1					
	2					
	3					
	4					

**Declaration:** All informations given above are correct to the best of my knowledge. I hereby abide by the rules & regulation laid down for IIISLA Benevolent Fund. I am fully aware that if any deleberate misrepresentation/concealment of fact is found at any time my rights shall be forfeited .

Date:

Place

(Signature of Applicant)