



## Indian Institute of Insurance Surveyors & Loss Assessors

Promoted by IRDA - Govt of India

Regd. Office : 5th Floor, Parishrama Bhawan, Basheer Bagh, Hyderabad (A.P.)  
Admn Office: Door No.3-5-890, Flat No 315, Paras Chambers, Himayath Nagar, Hyderabad (AP)

Date: 23.06.2015

To,

All IIISLA Members,

Rajasthan Chapters under West Zone of IIISLA are organizing training programs/workshops for their member surveyors at regular intervals to keep them update of technical developments in various disciplines of insurance survey & loss assessment, including latest developments in the insurance industry as a part of commitment for continuous professional development.

In this chain Rajasthan Chapter Unit **Sri Ganganagar** is organizing

**One Day Technical Learning Programme in “Motor and Fire” on 25.07.2015 at**

### **HOTEL VIKRAMADITYA**

Suratgarh Hanumangarh Bye Pass,

Sri Ganganagar (Raj.)-335001

Tel #+91-154-2110777,+91-9462894599/9414078437

Email#info@chittlangiagroup.com,www.chittlangiagroup.com

### **Objective of Programme**

To promote quality in profession of surveyors and loss assessors through education, training, seminar and to facilitate introduction of best practices amongst its members.

### **Compliance of Mandatory Regulations – Training and Seminars**

To provide and facilitate an opportunity to all its members, as per IRDA Regulation 2013, 14(A) (ii)

- Every member shall undergo training commensurate to their level of membership for the minimum period of training and
- Every member shall attend a minimum number of seminars for upgrading their existing level of membership.



## **VENUE & Timings**

**HOTEL VIKRAMADITYA**  
Suratgarh Hanumangarh Bye Pass,  
Sri Ganganagar (Raj.)-335001

Tel #+91-154-2110777,+91-9462894599/9414078437

<b>Total No. of Seats</b>	<b>100</b>	<b>For Motor + Fire</b>
<b>Delegate Fee</b>	<b>Rs. 1000.00</b>	<b>Non Residential Program</b>

For registration the interested members should send duly completed registration form to the following conveners of the program.

	<b>Convener-1</b>	<b>Convener-2</b>
<b>Name</b>	<b>Mr. S. S. Mutneja</b>	<b>Mr. Rajeev Gupta</b>
<b>Mobile</b>	<b>9828088243</b>	<b>9251589000</b>
<b>Email-ID</b>	<a href="mailto:ssmutneja@gmail.com"><b>ssmutneja@gmail.com</b></a>	<a href="mailto:Rajeevsurveyor500@gmail.com"><b>Rajeevsurveyor500@gmail.com</b></a>

### **General**

1. There shall be No spot registration.
2. Certificate of participation will be issued to all participants. (Subject to approval of designated observer from Zone)
3. Cancellation and refund are not permitted.
4. Registration will be on first come first serve basis.

### **Reporting**

The delegate should report at venue on 25.07.2015 at 08.30 A.M. Sharp.

In case of any clarification please contact the conveners of mentioned above

Dharam Parkash Songara  
Secretary  
Rajasthan Chapter  
**9414130808**

Encl: Registration Form



# INDIAN INSTITUTE OF INSURANCE SURVEYORS & LOSS ASSESSORS

“Promoted by IRDA: Govt of India”

Admin Office :-315, Paras Chambers, D.No.-3-5-890, Himayath Nagar, Hyderabad-500029 (T.S.) Website:- www.iiisla.co.in

Telephone- 040-66253666, 040-23261072, 040-23261073. email : admin@iiisla.co.in, iiisla.ad2013@gmail.com

DELEGATE REGISTRATION FORM FOR TECHNICAL TRAINING / WORKSHOP / SEMINAR							
Place of technical training/ workshop/ seminar to be attended						Affix Latest Photograph	
Date of Programme							
<b>TO BE FILLED IN CAPITAL LETTER</b>							
NAME OF DELEGATE							
ADDRESS OF DELEGATE							
SURVEYOR LICENCE NO				VALIDITY			
IIISLA MEMBERSHIP NO							
DISCIPLINE TECHNICAL TRAINING / WORKSHOP / SEMINAR		Tick Mark <input checked="" type="checkbox"/>	Motor		Non Motor		
CONTACT DETAILS		Tel/Mob. No		Mob. No.			
E-Mail ID							
DELEGATE FEE		Rs					
Mode of Delegate Fee Payment		Tick Mark <input checked="" type="checkbox"/>	Cash		Cheque		Demand Draft
<b>IF payment is through cheque - Details of cheque</b>							
Cheque No		Cheque Date		Drawn On (Bank Name)			
<b>IF payment is through demand draft - Details of draft</b>							
Draft No		Draft Date		Drawn On (Bank Name)			
Place							
Date		Signature of Delegate					