



Indian Institute of Insurance Surveyors & Loss Assessors

Promoted by IRDA - Govt of India

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

To,
All IIISLA Members,

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 **INDORE UNIT of M.P Chapter** is organizing a one day learning programme in “Motor” and “Fire” and “Miscellaneous” Departments on Sunday, 25.10.2015 at Hotel Landmark, Vijayanagar, Indore.

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.

TOPICS

Motor

- Airbags and ABS Break technology in Audi cars
- Types of Engine Losses
- Study of Automatic Transmission of Gear Box

Fire

- Case studies on Fire policies

Miscellaneous

- Case studies on Miscellaneous

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)

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

VENUE & Timings

Hotel Land Mark,
Vijaynagar, INDORE.

9.00 AM to 6.00 PM
(On 25-10- 2015)

Details	Motor	Fire	Miscellaneous
Total Seats	100	40	35
Fees in Rs	1500	1500	1500

Registration

For registration the interested members should send duly completed registration form to the following Conveners of the program before 15.10.2015.

Name of Convener	Mobile No	Email Id
Mr. Shyam Devnani	9827036128	iiislaindoreunit@gmail.com
Mr. Shailesh Narayan Kane	9827008796	iiislaindoreunit@gmail.com

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.
5. Out station members are requested to inform any in advance for any accommodation if required of which cost will be borne by member.

Reporting

The delegate should report at venue on 25.10.2015 at 8.30 A.M.

Sharp. In case of any clarification please contact: -

Name of Convener	Mobile No	Email Id
Mr. Shyam Devnani	9827036128	iiislaindoreunit@gmail.com
Mr. Shailesh Narayan Kane	9827008796	iiislaindoreunit@gmail.com

Sushi Maroo
Unit Coordinator/ Program Convener
INDORE

Encl: Registration Form



INDIAN INSTITUTE OF INSURANCE SURVEYORS & LOSS ASSESSORS

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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			Hotel Landmark, Vijayanagar, Indore.			Affix Latest Photograph	
Date of Programme			25.10.2015				
Programme on			Motor, Fire & Miscellaneous				
TO BE FILLED IN CAPITAL LETTER							
NAME OF DELEGATE							
ADDRESS OF DELEGATE							
SURVEYOR LICENCE NO			VALIDITY				
IIISLA MEMBERSHIP NO							
DISCIPLINE TECHNICAL TRAINING / WORKSHOP / SEMINAR			Tick Mark	√	Motor		Non Motor
CONTACT DETAILS			Tel/Mob. No		Mob. No.		
E-Mail ID							
DELEGATE FEE			Rs	1500.00 (One Thousand Five Hundred only)			
Mode of Delegate Fee Payment			Tick Mark	√	Cash		Cheque
							Demand Draft
IF payment is through cheque - Details of cheque							
Cheque No		Cheque Date		Drawn On (Bank Name)			
IF payment is through demand draft - Details of draft							
Draft No		Draft Date		Drawn On (Bank Name)			
Place Date			Signature of Delegate				