

ANNEX-VII(A)

Date : {Date}

To,
The Insurance Ombudsman
{tdCenter_address}

Dear Sir,

Re:Complaint against {tdInsurance} Insurance Comp
{tdBranch} Branch/Division

Policy No. {tdPolicyNo}

Name : {Name_of_Complainant}

Your Reference Complaint No. : {tdComplaint_No}

With Reference to your letter dated {Letter_Date_of_Annex_7} on the above subject, we hereby give Our unconditional and irrevocable consent to the Insurance Ombudsman to act as a Mediator between the Insurance Company and the Complainant and give his recommendation for the resolution of the complaint.

{Comments}

Yours faithfully,

{Signature}

Designation:{tdDesignation}