REQUEST FOR CONVERSION OF EXISTING POLICIES INTO e-POLICIES



Central Insurance Repository Limited

Aaj Digital...Toh Kal Befikar.

For Official Use only	
Insurer/AP Branch Name:	
Receipt Date & Time:	
Received By:	
Interaction ID:	

Please fill a separate form for each Insurance Company.

To The Manager Insurance Company Name		Name Of the eIA/C Holder: e-Insurance A/c No.:					
			PAN / UID No.:				
Dear (Sir,						
	Conversion of my e est you to convert	• .		as a	proposer into	electronic policies.	
Sr. No. Policy Number Name of the Life			Sr. Policy Number				
1				6			
2				7			
3				8			
4				9			
5				10			
The policy certificate held by you in physical form Please fill separate form if more than 10 policies Place Date			e d d m m y y y y			Signature of eIA Holder	
			Acknowled		nt Slip		
e-Insi	/ / Polices No.:			P/	AN/UID No.:		
a request for conversion of existing policies into e-Policies Insurer / AP Seal							
Place Date dd mm y y y y y					/	& Signature	
	se Note: ill receive a communic	cation from CIRL on c	redit of policy/p	oolices	in your account		
		For f	urther queri	es, pl	ease contac	t	
	Regd	. Office: 17th Floo	or, P J Towers	, Dala	l Street, Fort,	Mumbai - 400001	

CIRL Toll Free No. 1800 200 5533
 Visit us at - www.cirl.co.in
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