FORM - 6 (Read with Regulation 10)

Name of the Insurer: **Registration Number:**

Statement as on:

No

Certificate under Section 27A (5) of Insurance Act, 1938

Periodicity of Submission: Quarterly

Investment Particulars

Central Govt Securities, State Govt Securities or

Share

Holders

Name of the Fund:

Under the Custody of Total Bank / Custody (Rs) Others (Rs) Self (Rs) (Rs)**Policy** Share **Policy** Share Policy SH +PH Holders **Holders** Holders Holders **Holders**

Rs.Crore

Central Govt. Security

Other Approved Securities

Chairman	nairman Director 1			Full name: Director 2			
Full name:	Ful	Full name:					
Signature:	Sig	Signature:		Signatur	Signature:		
We certify that the above or lien as on the above	ve mentioned securities are held free date.	of any encumbrance	e, charge, hypothecation	1,			
CERTIFICATE							
	TOTAL		<u> </u>				
d. Other Investments							
c. Approved Investme	nts						
2. Other Investme	nts						
1. Approved Inve	stments						
b. Infrastructure Inves	tments						
2. Other Investme	nts						
1. Approved Inve	stments						
a. Housing & Loans to & FFE	State Govt. for Housing						
3 Investment subject to I	Exposure Norms						

Note:

- 1. Custodian should certify that he is not disqualified under SEBI (Custodian of securities) Regulations, 1996 as amended from time to time.
- 2. Value of the Securities shall be as per Guidelines
- 3. In the case of Life Insurance Business, FORM-6 shall be prepared in respect of each fund and in aggregate for Segregated Funds
- 4. The values under certificate should be adjusted for Purchase / Sale of investments purchased and awaiting settlement. A reconciliation to this effect should be attached to the Certificate.

Signature: Full name: Principal Officer