

INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY

Parishrama Bhavan, 3rd Floor, Basheerbagh, Hyderabad: 500 004

POLICY HOLDER COMPLAINTS REGISTRATION FORM

(Separate forms to be used for each complaint)

1. Name of the complainant: _____
 2. Address of the complainant: _____

3.E-mail/Telephone/Fax : _____

4. Whether Individual /Company:
 (Please tick)

Individual ☐ Company/other entities ☐

5. Name of the Insurance company:_____

6. Address of the servicing office/branch with office code(if available):

7. Policy number/Proposal deposit number:

8. Nature of complaint: (Please tick)

Life		Non-life	
Policy related		Policy related	
Non-receipt of policy-bond		Fire Insurance	
Non-revival of lapsed policies		Marine Insurance	
Transfer of policy from one branch to another		Motor Insurance	
(1) Non-refund of proposal deposit.		Health Insurance	
(2) Wrong plan and term allotted		(a) Against company	
(3) Adjustment of premium		(b) Against TPA	
Cancellation of policy		Other Misc Insurance	
Issue of duplicate policy		Non-settlement of claim	
Alterations in policy		Fire Insurance	
Nomination/Assignment of policies		Marine Insurance	
Claim related		Motor Insurance	
Non-payment of surrender value		Health Insurance	
Correct surrender value not paid		(a) Against company	
Non-settlement of maturity payment		(b) Against TPA	

Non-payment of claim		Other Misc Insurance	
Non-payment of annuities		Repudiation of claim/dispute in quantum	
Repudiation of claim		Fire Insurance	
Agent related		Marine Insurance	
Others		Motor Insurance	
		Health Insurance	
		A) Against Company	
		B) Against TPA	
		Other Misc Insurance	
		Others	

9. Claim No:_____

10. Details of complaint (including details of document copies attached):

SIGNATURE

(FOR OFFICE-USE)

I. REFERRAL/REPLY INFORMATION:

Referral date(to companies): _____

Reply dates(to
complainant): _____

II. Status: Pending/Closed/Re-opened.

III.Previous Ref No: _____
(in case reopened)

IV.Remarks: _____

V. Complaint disposed of to the satisfaction of complainant: Yes / No

VI. Complaint justified: Yes / No