

FORM NL-27- PRODUCTS INFORMATION**NOT APPLICABLE**

Name of the Insurer:

Date:

<i>Products Information</i>						
<i>List below the products and/or add-ons introduced during the period</i>						
Sl. No.	Name of Product /Add On	Co. Ref. No.	IRDAI UIN	Class of Business^(a)	Category of product	Date of allotment of UIN
1						
2						
..						
n						

Note: -

(a) Defined as Fire, Marine Cargo, Marine Hull, Motor OD, Motor TP, Health, Personal Accident, Travel Insurance, Workmen's Compensation/ Employer's Liability, Public/ Product Liability, Engineering, Aviation ,Crop Insurance and Other segments(Please specify)