

Broker:

Proportional Treaty Account Cash Loss Details														
Sl. No	Cedant	Treaty Type	U/W Year	Policy Period	RI Share Placement %	Original Insured	Date Of Loss	Cause Of Loss	Names of Reinsurers	Cedant Reference Number	Cash Call Received Date	Cash Call Process Date	Settlement Due Date	IF Through Broker – Broker Name
1														
1														
2														
3														
Total														

Principal Officer

Chartered Accountant

## Note

Col A  
Col B  
Col C  
Col D  
Col E  
Col F

Serial No. - Please maintain the same serial no for each remittance transaction

Cedant - Name of the cedant from whom cash call has been received is to be mentioned

Treaty Type - please indicate the specific treaty under which the loss has been notified.

U/W year - please indicate the u/w year of the treaty in which the loss has been notified

Period - please indicate the period of the treaty contract in which loss has been notified.

RI Share refers to the final placement % order received from the cedant.

Please note if the final order placement has been placed amongst more than 1 reinsurer, please enter remittance details for each reinsurer in separate rows and maintain the same serial no. for all remittar

Col G

Original Insured : details of the original insured whose loss is being reported to be indicated where applicable

Col H

Date of Loss - date on which actual loss occurred should be indicated

Col I

Cause of Loss - Brief descript eg: flood / earthquake / Fire @ premises etc.

Col J

Name of the reinsurers from whom recovery is to be done

Col K

Cedant Reference No - Indicate the reference no. given by the cedant for the cash call

Col L

Cash Call Received Date : date on which you received the cash call request from the cedant

Col M

Cash Call Processed Date - Date on which you sent the cash call onwards to the reinsurers.

Col N

Settlement Due Date to be indicated

Col O

If the placement has been done through a broker then please indicate the name of the broker. This should be the broker to also whom the cash call has been raised.

Col P /Q/ R

the Claim amount of should be filled in either one of these columns depending on which currency recovery has been sought by the cedant

Col S

No of days Delay - this would be the date of preparation of the statement - the date on which the settlement was due

Col T

Remarks - This column should be filled in case the value in Col S is more than 15. remittance delays beyond 15 days to be clarified.

Cash Loss Amount			No. Of Days Delay	Remarks – Response Of Reinsurer / Any Delay Reason
INR	USD	EURO		
0.00	0.00	0.00		

Proportional Treaty