

FBC REINSURANCE LIMITED

FIDELITY GUARANTEE FACULTATIVE UNDERWRITING REQUIREMENTS

CEDENT DETAILS:-

- i. NAME: (iii) OFFERING OFFICER.....
- ii. BRANCH/LOCATION:.....

INSURED DETAILS: -

- i. NAME:
- ii. TRADE/OCCUPATION: -
- iii. NUMBER OF EMPLOYEES/PERSONS.....
- iv. CLASSIFICATION OF EMPLOYEES BY POSITION: -
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SUMS INSURED: -

- i. LIMIT OF LIABILITY
- ii. COLLUSION LIMIT (IF ANY)

RATING: -

- i. RATE %
- ii. EXCESS/DEDUCTIBLE

PERIOD OF REINSURANCE:

REINSURANCE COMMISSION %

CEDANT'S RETENTION.....

CLAIMS EXPERIENCE (last 3 years)

	CLAIMS USD	PREMIUM USD	LOSS RATIO %
Current year			
1 st Previous year			
2 nd Previous year			
3 rd Previous year			
GRAND TOTAL			