

FORM NL-33- REINSURANCE/RETROCESSION RISK CONCENTRATION

Name of the Insurer:
Registration No:

Date:

(Amount in Rs. Lakhs)

S.No.	Reinsurance/Retrocession Placements	No. of reinsurers	Premium ceded to reinsurers (Upto the Quarter)			Premium ceded to reinsurers / Total reinsurance premium ceded (%)
			Proportional	Non-Proportional	Facultative	
	Outside India					
1	No. of Reinsurers with rating of AAA and above					
2	No. of Reinsurers with rating AA but less than AAA	1	25141.23			100
3	No. of Reinsurers with rating A but less than AA					
4	No. of Reinsurers with rating BBB but less than A					
5	No. of Reinsurers with rating less than BBB					
	Total (A)	1	25141.23			100
	With In India					
1	Indian Insurance Companies					
2	FRBs					
3	GIC Re					
4	Other (to be Specified)					
	Total (B)					
	Grand Total (C)= (A)+(B)	1	25141.23			100

Note:-
(a) The total of Premium ceded to reinsurers (Proportional, Non-Proportional and Facultative is consistent with all relevant NL forms; The aforementioned Business figures are matching with all relevant NL forms. In case of difference, pl give reasons
(b) Figures are to be provided upto the quarter