

FORM NL-41 OFFICES INFORMATION

Name of the Insurer: **XL Insurance Company SE, India Reinsurance Branch**
Registration No. **FRB/007** and Date of Registration with the IRDAI **1.02.2017**
Statement as on: 31st March 2022

| Sl. No. | Office Information | Number | |
|---------|---|-----------------------------------|--|
| 1 | No. of offices at the beginning of the year | 1 | |
| 2 | No. of branches approved during the year | 0 | |
| 3 | No. of branches opened during the year | Out of approvals of previous year | |
| 4 | | Out of approvals of this year | |
| 5 | No. of branches closed during the year | 0 | |
| 6 | No of branches at the end of the year | 1 | |
| 7 | No. of branches approved but not opened | 0 | |
| 8 | No. of rural branches | 0 | |
| 9 | No. of urban branches | 1 | |
| 10 | No. of Directors:- (a) Independent Director (b) Executive Director (c) Non-executive Director (d) Women Director (e) Whole time director | 0 | |
| 11 | No. of Employees (a) On-roll: (b) Off-roll: (c) Total | 7 7 | |
| 12 | No. of Insurance Agents and Intermediaries (a) Individual Agents, (b) Corporate Agents-Banks (c) Corporate Agents-Others (d) Insurance Brokers (e) Web Aggregators (f) Insurance Marketing Firm (g) Motor Insurance Service Providers (DIRECT) (h) Point of Sales persons (DIRECT) (i) Other as allowed by IRDAI (To be specified) | 0 | |

Employees and Insurance Agents and Intermediaries -Movement

| Particulars | Employees | Insurance Agents and Intermediaries |
|--|-----------|-------------------------------------|
| Number at the beginning of the quarter | 8 | |
| Recruitments during the quarter | 1 | |
| Attrition during the quarter | 2 | |
| Number at the end of the quarter | 7 | |