## FORM NL-45-GRIEVANCE DISPOSAL

Name of the Insurer: Date:

## **GRIEVANCE DISPOSAL**

SI No.	Particulars	Opening Balance *	Additions during the quarter (net of duplicate complaints)	Complaints Resolved			Complaints	Total Complaints
				Fully Accepted	Partial Accepted	Rejected	Pending at the end of the quarter	registered up to the quarter during the financial year
1	Complaints made by customers							
_	Proposal Related							
b)	Claims Related	0	81	54	27		0	81
c)	Policy Related							
d)	Premium Related							
_	Refund Related	0	1	1	0		0	1
f)	Coverage Related							
g)	Cover Note Related							
	Product Related							
i)	Others (to be specified)							
	(i)							
	Total		82	55	27			82
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2	Total No. of policies during previous year:	Nil						
3	Total No. of claims during previous year:	Nil						
4	Total No. of policies during current vear:	4049230						
5	Total No. of claims during current year:	80445						
6	Total No. of Policy Complaints (current year) per 10,000 policies (current year):	Nil						
7	Total No. of Claim Complaints (current year) per 10,000 claims registered (current year):	Nil						
		Complaints made by customers		Complaints made by Intermediaries		Total		
8	Duration wise Pending Status	Number	Percentage to Pending complaints	Number	Percentage to Pending complaints	Number	Percentage to Pending complaints	
a)	Up to 15 days	0	0	0	0	0	0	
b)	15 - 30 days	0	0	0	0	0	0	
	30 - 90 days	0	0	0	0	0	0	
d)	90 days & Beyond	0	0	0	0	0	0	
	Total Number of Complaints	0	0	0	0	0	0	

Note :- (a) Opening balance should tally with the closing balance of the previous quarter.

- (b) Complaints reported should be net of duplicate complaints
- (c) No. of policies should be new policies (both individual and group) net of cancellations

- (d) Claims should be no. of claims reported during the period
- (e) For 1 to 7 Similar break-up to be given for the complaints made by intermediaries.