

CAMSRep
Insurance Repository & Services

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Application No.	<input type="text"/>
Insurance Co.	<input type="text"/>
AP Code	<input type="text"/> Employee <input type="text"/>
PAN Number*	<input type="text"/>
UID Number*	<input type="text"/>
Mobile No.*	<input type="text"/>
Date of Birth*	<input type="text"/> DOB proof* <input type="text"/>
ID Proof*	<input type="text"/>
Email*	<input type="text"/>

Paste your recent
color photo (optional)
and Sign.

Applicant Details (Please fill this form in ENGLISH and in BLOCK LETTERS. Field marked with asterisk (*) are compulsory.)

First name*

Middle Name

Last Name

Gender* ☐ Male ☐ Female ☐ Others ☐ Resident Indian ☐ NRI*

Father/Spouse

Address Line 1*

Address Line 2

LandMark

City*

Pin Code*

State* Country*

Address proof*

Please find here with my insurance policy numbers under various insurance companies for conversion.

Insurance Company				Policy number															
<div></div>				<div></div>															
Name				<div></div>															
Place																			
Date																			

Note : -ID Proof & Address Proof to be produced in original along with the eIA Application form for verification.
-Self Attested Photocopies of ID proof, Address Proof to be submitted along with eIA Application form.

Benefits of eInsurance Account

- Safe & convenient. Ease of maintenance.
 - One Time KYC : No KYC repetition when You buy a new policy.
 - Access & monitoring of e-policies, value added services
- www.camsrepository.com, Ph:18002007737