

Date: **18/07/2023**



Ajay Kumar Nayak

Address: **At- Samantarapur. Khurda**

Subject: Point of Sales Person (PoSP) Appointment Letter

This is in reference to the application made by you for enrolling yourself to act as Point of Sale Person.

This is to confirm that you have successfully completed the prescribed training and have also passed the examination specified for Point of Sales examination conducted by **Religare Broking Limited** under the Guidelines on Point of Sales Person for Non-life and Health Insurers.

Aadhar No: **XXXX XXXX 3508**

PAN No: **AKLPN 2132 M**

PoSP Id: **ACAKLPN2132MF1**

This letter authorizes you to act as Point of Sales Person for **Religare Broking Limited** to market products categorized and identified under the POS Guidelines.

In case you wish to work for another company, you are required to obtain a fresh letter from the new insurer/ insurance intermediary in order to act as Point of Sales Person for that entity.

Yours truly,

(Rajeev Gupta)
Principal Officer

Religare Broking Limited

2ND Floor, P-14, 45/90, P Block, Connaught Place, New Delhi 110001

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