



**DEDICATED ADMINISTRATION SERVICES PVT. LTD.**

**No. 46/1/3, Narahenpita Road, 3<sup>rd</sup> Floor, Nawala 11222, Srilanka**

**Annexure-B: To be used by the underwriting office of Insurance company (Applicable for retail policy only)**

To,

*Dedicated Administration Services Pvt Ltd*

*No.46/1/3, Narahenpita Road, 3 rd Floor*

*Nawala-11222*

*Dear Sir/Madam,*

*We have received premium towards health insurance policy of \_\_\_\_\_ bearing policy no. \_\_\_\_\_ & the policy is in force.*

*We condone the delay submission of the documents and allow processing of the claim on merit basis.*

*Date* \_\_\_/\_\_\_/\_\_\_

\_\_\_\_\_

*(Authorised signatory)*