



Date:-

To  
The Branch Incharge  
Mahalaxmi Life Insurance Ltd  
Branch Name:-

Sub:- Registration For Mobile Insurance Services For My Agent License

Ref:- My AgentCode No:-

Dear Sir/Madam,

I am an Agent License holder of your Insurance Company branch at . I wish to register for the mobile Insurance services of the Company. I am hereby submitting my request for the activation of mobile insurance services for my License Details of which are as under:

License Number:	<input type="text"/>
Customer Code/AgentCode:	<input type="text"/>
Date of Birth:-	<input type="text"/>
MobileNo:-	<input type="text"/>
Email ID:-	<input type="text"/>
Name Of the License Holder:-	<input type="text"/>

I have gone through in detail the terms and conditions prescribed by the insurance company placed at its website[ <https://mahalaxmilife.com.np/privacy-policy/> ] with regard to its mobile insurance services provided to the Agent of the company. I agree to abide by the same and accept them unconditionally.

I further agree to abide by any modifications to these terms and conditions that may be made by the insurance company in future with or without any notice.

I further acknowledge the responsibility on me for the transactions executed through mobile insurance services and I agree that the same will be binding on me. I therefore, request you to kindly active the mobile insurance services for my AgentCode (accountNo) and provide me with MPIN – Mobile Insurance Personal Identification number and other details as my be necessary.

Kindly Communicate once the services are activated for my account.

Thanking you,

Yours faithfully

Signature:-

Name Of the License Holder:-