

## जीवन बीमा व्यवसाय गर्ने बीमकको बीमाङ्गीय मूल्याङ्कन सम्बन्धी निर्देशिका-२०७६

बीमा ऐन, २०४९ को दफा ८ (घ२) ले दिएको अधिकार प्रयोग गरी सोही ऐनको दफा ८(ड) को प्रयोजनका लागि बीमा समितिले देहायको “जीवन बीमा व्यवसाय गर्ने बीमकको बीमाङ्गीय मूल्याङ्कन सम्बन्धी निर्देशिका-२०७६ जारी गरेको छ ।

१. संक्षिप्त नाम र प्रारम्भ : (१) यो निर्देशिकाको नाम “जीवन बीमा व्यवसाय गर्ने बीमकको बीमाङ्गीय मूल्याङ्कन सम्बन्धी निर्देशिका-२०७६” रहेको छ ।

(२) यो निर्देशिका २०७६ साल आश्विन १ गतेदेखि लागू हुनेछ

२. परिभाषा : विषय वा प्रसंगले अर्को अर्थ नलागेमा, यस निर्देशिकामा-

(क) “बीमक” भन्नाले जीवन बीमा व्यवसाय गर्ने बीमक सम्भन्नु पर्दछ ।

(ख) “बीमाङ्गी” भन्नाले बीमा नियमावली, २०४९ को नियम ३५ बमोजिमको योग्यता भएको बीमाङ्गी सम्भन्नु पर्दछ ।

३. बीमाङ्गीको नियुक्ति : (१) बीमकले बीमाङ्गीय मूल्याङ्कन गर्नका लागि बीमा नियमावली, २०४९ को नियम ३५ बमोजिमको योग्यता भएको बीमाङ्गी नियुक्त गर्नुपर्नेछ ।

(२) जीवन बीमा तर्फ अनुभव भएका बीमाङ्गीलाई मात्र बीमकले बीमाङ्गी नियुक्त गर्नु पर्नेछ ।

(३) बीमकले आफ्नो बीमाङ्गीय मूल्याङ्कन गर्नका लागि उप-दफा (१) र (२) बमोजिम नियुक्त गर्न चाहेको बीमाङ्गीको शैक्षिक योग्यता खुल्ने प्रमाणपत्र र व्यक्तिगत विवरण सहित समितिको पूर्व स्वीकृतिको लागि पेश गर्नुपर्नेछ ।

(४) नेपालमा दर्ता भएको एउटा बीमकको बीमाङ्गी भई कार्य गरिरहेको बीमाङ्गीलाई अर्को बीमकको बीमाङ्गी नियुक्त गरिने छैन ।

(५) बीमाङ्गी सम्बन्धी अन्य व्यवस्था अनुसूची -२ बमोजिम हुनेछ ।

४. बीमाङ्गीको प्रतिवेदन पेश गर्नुपर्ने (१) बीमकले प्रत्येक आर्थिक वर्ष समाप्त भएको पाँच महिना भित्र अनुसूची -४ बमोजिमको ढाँचामा बीमाङ्गीको प्रतिवेदन पेश गरी सक्नु पर्नेछ ।

(२) बीमाङ्गीय मूल्यांकन गर्दा गणितिय कोष (Mathematical Reserve) निर्धारण कुल बीमा शुल्क (Gross Premium Method) विधि प्रयोग गरी गर्नु पर्नेछ ।

(३) बीमाङ्गीय मूल्याङ्कन गर्दा वास्तविक बचत (Actual yield) वा ६ प्रतिशत ब्याजदर मध्ये जुन कम हुन्छ सोहि दरमा गर्नु पर्नेछ ।

(४) बीमाङ्गीको मूल्याङ्कन प्रतिवेदनमा निम्न तथ्यहरु खुलेको/संलग्न रहेको हुनु पर्नेछ ।

(क) बीमाङ्गीय मूल्याङ्कन प्रतिवेदनमा समावेश गरिएका तथ्याङ्कको शुद्धता तथा पर्याप्तता सम्बन्धमा बीमकको संचालक समितिको उद्घोषण सहितको निर्णयको प्रतिलिपि ।

(ख) बीमाङ्गीको प्रतिवेदनले गरेको सिफारिस बमोजिम बीमकले कायम गर्न चाहेको बोनस दर र अन्य व्यवस्थाहरु सम्बन्धमा बीमकको संचालक समितिको निर्णयको प्रतिलिपि ।

(ग) बीमाङ्गीय मूल्याङ्कन प्रतिवेदनमा समावेश गरिएका तथ्याङ्कको शुद्धता तथा पर्याप्तता सम्बन्धमा बीमाङ्गीको उद्घोषण ।

५. बचतको बाँडफाँड : (१) बीमकले अनुसूची -३ बमोजिम बीमा कोष व्यवस्थापन गर्नु पर्नेछ ।

(२) बीमाङ्गीको मूल्याङ्कन प्रतिवेदन बमोजिम जीवन बीमा व्यवसायमा भएको बचत (कर्मचारीलाई बोनस छुट्याउनु अगाडी) को घटिमा नब्बे प्रतिशत (९०%) रकम बीमालेख लिनेको कोष (Policyholders Fund) मा सार्नु पर्नेछ ।

(३) दफा ३ बमोजिम समितिमा पेश हुन आएको बीमाङ्गीको प्रतिवेदनको आधारमा आवश्यक परेमा समितिले शेयरधनी कोष (Shareholders Fund) बाट बीमालेख लिनेको कोष (Policyholders Fund) मा रकम सार्न तथा अन्य आवश्यक निर्देशन दिन सक्नेछ ।

(४) उप-दफा (१) बमोजिम बीमालेख लिनेको कोषमा सारिएको रकम शेयरधनी कोषमा फिर्ता लान पाइने छैन ।

६. बोनस सम्बन्धी व्यवस्था (१) बीमा नियमावली, २०४९ को नियम ३६ बमोजिम समितिबाट स्वीकृत बीमाङ्गीको मूल्याङ्कन प्रतिवेदन अनुसार बीमितलाई प्रदान गरिने मुनाफा दर मूल्याङ्कन अवधिको शुरु मिति देखि नै लागू गर्नुपर्ने छ ।

(२) बीमा समितिबाट अर्को मुनाफा दर स्वीकृत नभएसम्म उप-दफा (१) बमोजिम बीमकले बीमालेख लिनेलाई प्रदान गर्ने मुनाफा दरलाई नै अन्तरिम मुनाफा दर (Interim Bonus Rate) कायम गर्नु पर्नेछ ।

(३) बीमा नियमावली, २०४९ को नियम ३६ बमोजिम समितिबाट स्वीकृत भएको बीमाङ्गीय मूल्याङ्कन प्रतिवेदनका व्यवस्थाहरु (Provisions) सोही आर्थिक वर्षको वित्तिय विवरणमा देखाउनु पर्नेछ ।

७. मूल्याङ्कन कार्यविधि (१) जीवन बीमा व्यवसाय गर्ने बीमकको बीमाङ्कीय मूल्याङ्कन सम्बन्धमा बीमाङ्कीले अवलम्बन गर्नुपर्ने सामान्य नियमहरु अनुसूची (१) बमोजिम हुनेछ ।

(२) जीवन बीमा व्यवसाय गर्ने बीमकको बीमाङ्कीय मूल्याङ्कन गर्ने बीमाङ्कीको परिभाषा, काम, कर्तव्य र अधिकार अनुसूची (२) बमोजिम हुनेछ ।

(३) जीवन बीमा व्यवसाय गर्ने बीमकको बीमाङ्कीय मूल्याङ्कन गर्दा बीमा कोष ब्यवस्थापन सम्बन्धी ब्यवस्था अनुसूची (३) बमोजिम हुनेछ ।

(४) जीवन बीमा ब्यवसाय गर्ने बीमकको बीमाङ्कीय मूल्याङ्कन गरी बीमाङ्कीले पेश गर्नुपर्ने मूल्यांकन प्रतिवेदनको ढाँचा अनुसूची (४) बमोजिम हुनेछ ।

८. खारेजी र बचाउ (१) जीवन बीमा व्यवसाय गर्ने बीमकको बीमाङ्कीय मूल्याङ्कन सम्बन्धी निर्देशिका २०६५ खारेज गरिएको छ ।

(२) उपदफा (१) बमोजिम खारेज गरिएको निर्देशन बमोजिम भए गरेका काम कारवाही यसै निर्देशन बमोजिम भए गरेको मानिनेछ ।

अनुसूची १  
(निर्देशिकाको दफा ७ (१) संग सम्बन्धित)  
सामान्य नियम

**ANNEXURE I**  
**General Rules**

1. Every insurer shall, who transacts or begins to transact life insurance business, cause an investigation into its financial affairs at the end of each financial year or at any time specified by Beema Samiti, including valuation of its assets and liabilities; and cause an abstract to be made in accordance with procedures laid down in the Annexure 4 to these Rules within three months from the valuation date at which such investigation is required to be made. Such investigation shall be determined by an Actuary in practice.

The appointed actuary shall perform the following duties in respect of such investigation:

- (a) **Determination of Reserves:** the reserves so determined by the appointed actuary are adequate to meet all liabilities current and contingent in respect of insurers policies on its books;
  - (b) **Determination of Surplus:** the surplus so determined by the appointed actuary, shall be distributed to the policyholders and shareholders as prescribed by this directive.
2. Two copies of an abstract made under Rule 1 (and one in soft copy with excel sheets) shall be submitted to the Board within 2 months after Provisional Approval of financial statement. The Board shall have power to call for any "additional information and documents relating to the actuarial valuation.
  3. There shall be appended to every abstract required by Rule 2, a statement of solvency margin certified by the appointed actuary and counter-signed by the director or principal officer of the insurer, as per the form mentioned in Annexure 4. Appointed actuary may use the method of valuation in determining the amount of liabilities mentioned in the Solvency Margin Directive.
  4. Beema Samiti shall take necessary actions against any insurer that fails to submit the actuarial valuation report under these Rules as per the time schedule referred in Rule 2.

अनुसूची २  
(निर्देशिकाको दफा ७ (२) संग सम्बन्धित)  
बीमाङ्गीको परिभाषा, काम, कर्तव्य र अधिकार

**ANNEXURE II**  
**Definition, rights and duties of appointed actuary**

1. Actuary means a fellow member of any of the following professional bodies: -
  - (a) Institute and Faculty of Actuaries
  - b) Institute of Actuaries of India
  - c) Society of Actuaries, USA
  - d) Canadian Institute of Actuaries.
  - e) Institute of Actuaries of Australia
  - f) Worldwide recognized other professional bodies of actuary
2. Actuary shall submit all the required documents to Beema Samiti in his/her professional capacity.
3. The actuary shall disclose his/her certificate of membership, Certificate of Practice (COP) / Continuous Professional Development (CPD) credits and a declaration that he/she is not disqualified on the grounds mentioned under (6) below.
4. An appointed actuary shall carry out the functions of only one insurer in Nepal.
5. An appointed actuary shall have an experience of at least five years.
6. Disqualifications. An actuary shall be disqualified if he/she-
  - a. Is held guilty by, or disciplinary action is pending in any professional body / court / any public authority;
  - b. Is above the age of 75 years;
  - c. Has not renewed the membership of the concerned professional body.
  - d. Is not mentally sound;
  - e. Is not physically fit.

अनुसूची ३  
( निर्देशिकाको दफा ७(३) संग सम्बन्धित)  
बीमा कोष व्यवस्थापन

**ANNEXURE III**  
**Maintenance of Funds**

**1. Maintenance of Fund**

A life insurer shall maintain the following funds

- (a) **Life fund:** This fund contains the premium received from policyholders, income from investments, and any other permissible income, the payments out of the fund shall consist of payments to policyholders on the happening of events specified in the contracts, and other payments for the maintenance of life insurance business including transfer of surplus as per No. 2(c).
- (b) **Shareholders' fund:** It consists of share capital, reserve and surplus, catastrophic reserve and compulsory reserve fund. Distribution to shareholders shall be made out of this fund. Further, transfer to compulsory reserve fund shall also be made out of this fund.
- (c) **Compulsory Reserve fund:** This fund contains the transfers of amount for the shareholders' fund exclusively for maintenance of solvency margin, ex-gratia payments to policyholders. All such payments from this fund shall be subject to approval of Beema Samiti.

**2. Payments to policyholders and shareholders out of surplus.**

- (a) Life insurers shall maintain the following two separate accounts in respect of its policyholders' fund:
  - (i) Participating Policies Account
  - (ii) Non-Participating Policies Account.
- (b) The Participating Policies Account shall be in respect of policies which are entitled for a share of surplus in the Account during the period of contract. Non-Participating Policies Account shall be in respect of those policies that shall not belong to the Participating Policies Account.

- (c). In every financial year minimum 90% of surplus arising in the Participating Policies Account which is determined at the valuation date by the Insurer's appointed actuary approved by the Beema Samiti shall be allocated to policyholders' fund for distribution to the policies which are in-force at the valuation date by way of bonus entitlement mentioned in the contracts; and the balance 10% of surplus may be transferred to the shareholders' fund.
- (d). In every financial year, 100% of surplus arising in the Non-Participating Policies account which is determined at the valuation date by the Insurer's actuary approved by the Beema Samiti, may be transferred to the shareholders' fund.

### **3. Maintenance of Compulsory Reserve Fund**

In every financial year, the insurer's appointed actuary shall determine the amounts transferrable to Compulsory Reserve Fund out of the transferrable surplus to shareholders in Participating Policies Account and Non-Participating Policies Account,

The objective of maintaining compulsory reserve fund is to maintain solvency margins prescribed by Beema Samiti. Moreover, this can also be used to create and maintain any other reserve where the appointed actuary feels necessary to keep aside or where Beema Samiti directs to do so.

**अनुसूची ४**  
**निर्देशिकाको दफा (४) संग सम्बन्धित)**  
**बीमाङ्गीय मूल्याङ्कन प्रतिवेदनको ढाँचा**

**ANNEXURE IV**  
**Format of Valuation Report of Life Insurer**

**Form No. 1**  
**Executive Summary**

Name of Insurer:

Reg. Number:

Date of Registration:

Actuarial Report and Abstract as at

Valuation Date:

I, on behalf of the insurer, state the following:

1. On the basis of the investigation made by our appointed actuary: (Name) at the date mentioned above into the financial condition of our insurance business, and herewith enclose the following forms, in accordance with provisions of Section 26 of the Insurance Act and direction no. 3 (1) of this directive.

<b>Description</b>	<b>Form</b>	<b>No. of pages</b>
Actuarial Report and Abstract	<b>Form 2</b>	
Moment Statistics (Statement of Additions and Deletions)	<b>Form 3</b>	
Lapse Statistics	<b>Form 4</b>	
Valuation Results	<b>Form 5</b>	
Valuation Balance Sheet	<b>Form 6</b>	
Statement of Surplus Allocation	<b>Form 7</b>	
Specimen Policy Values	<b>Form 8</b>	
Bonus Rates Declared	<b>Form 9</b>	
Solvency Statement	<b>Form 10</b>	
Require Solvency Margin	<b>Form 10A</b>	
Available Solvency Margin	<b>Form 10B</b>	
Admissible Assets	<b>Form 11</b>	
Sensitivity Analysis	<b>Form 12</b>	
Cash Flow Statement	<b>Form 13</b>	
Insurance Policy Statistics	<b>Form 14</b>	
Total number of Forms enclosed:-----		

2. I certify that full and accurate particulars, of every policy under which there is a liability either actual or contingent, have been furnished to the appointed actuary for the purposes of the above.

3. Executive Summary of the Investigation is as under

Item	Current	Immediately preceding year	Immediately preceding year to year under col 3.	Line	Remarks
1	2	3	4	5	6
Total Premium Income [Written]-before reinsurances				1	Premiums collected in respect of new policies issued during the year ended valuation date
Total Net Premium Income after reinsurances				2	Premium retained in the company out of that in Line 1
Total Mathematical Reserves before Reinsurance				3	Line 24 of Form 5
Total Mathematical Reserves after Reinsurance				4	Line 23 of Form 5
Solvency Ratio				5	Line 8 of Form 10
Ratio of Management Expenses to Total Premium collected				6	Self-explanatory
New Business Persistency Ratio				7	Ratio of number of policies at the valuation date to the total number of policies issued during the year ended valuation date
NPA ratio (Ratio of Non-Performing Assets to total Assets)				8	Self-explanatory
Mortality Ratio [A/E)				9	Ratio of actual number of death claims to the expected number of death claims as per Actuary.
Agency Turnover ratio				10	Ratio of number of agents at the valuation date to the total number of agents during the year ended valuation date
Overall Lapse Ratio				11	Ratio of total number of policies

					lapsed without acquiring any value during the year ended valuation date to the total number of policies at the start of that period.
Average rate of return earned on policyholders' funds				12	See item 9 of Form 2 regarding method of calculation
Capital Employed [Equity + Reserves]				13	Self-explanatory
Profit [Surplus in Policyholders' fund]				14	Self-explanatory
Market Share				15	Ratio of New Business premium income collected by the insurer to the total new business premium income in the market for all insurers.
Market Price per one ordinary share				16	Please mention if listed as on the last transaction date prior to the valuation date
NB Growth rate				17	Self-explanatory

4. The appointed actuary has recommended the following amounts for transfer to the shareholders:

5. The appointed actuary has recommended the following amounts for bonuses to the policyholders:

6. The appointed actuary has made the following observations which we are examining and taking suitable action:

Names and Signatures of CEO, and Principal Officer.

Place

Date

Company Seal

## Form No. 2

## ACTUARIAL REPORT AND ABSTRACT

S.No	Item	Particulars
1	Name and Address of Insurer with phone/fax numbers & Email:	
2	Date of Registration:	
3	Date of commencement of business: [the date of issuance of the first insurance contract]	
4	Name and address of Appointed Actuary:	
4.1	Name of the professional body in which the actuary is a fellow  Membership No. Date of Admission as fellow COP No. [Certificate of Practice number if issued by the actuarial Professional body or relevant documentary evidence]	
5	Valuation Date of the Actuarial Report and Abstract:	
6	Brief description of the products of the insurer included in the Abstract. (The appointed actuary shall mention the salient features of the products, furnishing the names of the new products introduced during the inter-valuation period).	
7	Any events that occurred during the financial year which the appointed actuary considers necessary to report in this abstract. He should report specifically the deviations from the business plan furnished to the Regulator; underwriting policy, reinsurance policy, investment policy, etc.	
8	Valuation Assumptions	

Table 8.1 : Valuation Assumptions: the table of mortality, the rate of interest and the valuation basis assumed in the valuation for the current year's valuation date as well as for the previous year;

S No	Name of Product	Interest rate(s)		Mortality Rates		Morbidity Rates		Remarks
		Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	
		1	2	3	4	5	6	
1								
2								

9.	The average rate of interest yielded in the inter-valuation period by the assets constituting the following funds and for this purpose the interest of the year shall be taken to be the whole of the interest credited to the respective fund during the year after deduction of income tax charged thereon (any refund of income tax in respect of expenses of management made during the year being taken into account); the yield calculation shall be determined using the following formula:	
	yield = $2 I / (A + B - I)$ ; where A is the fund at the start of the year, B is the fund at the end of the year; I is the interest and other investment income received/receivable during the year.)	

Table showing the average rate of interest yielded

S.N.	Details	Average rate of interest Yielded (%p.a.)	
		Current Year	Previous Year
1	Participating Business		
2	Non-Participating Business		
3	Total Business		

10.	I enclose the following forms for this purpose:- [please furnish as Annexure]	
11.	Brief description of method of valuation: [The appointed actuary should use the gross premium method of valuation. He should also describe the methods adopted for valuing guarantees, options, extra premiums, riders, etc. for which provisions have been created by him. The appointed actuary shall create any other provision (to be specified) mentioned in the Form 5, which could be for 'deaths due to epidemics/nature's vagaries/catastrophe risks', premium deficiency, data deficiency, with justifications. The Board may recommend the insurer to have peer reviewer actuary for reviewing the valuation work of the appointed actuary, before submission of the report to the Board of Insurer, and later to Beema Samiti.]	
12	<p>CERTIFICATE OF APPOINTED ACTUARY OF THE INSURER</p> <p>I, (the name of actuary), being the appointed actuary to the insurer (name of insurer), being the fellow of _____, with membership number: _____ and COP No.: _____, to the best of my knowledge certify the following:</p> <p>(a) that I have included each and every policy for which there is a policy liability in conducting the valuation of liabilities for the statutory purposes. I enclose the certificate issued by the Principal officer/CEO of the insurer.</p> <p>(b) that I have taken all reasonable steps to ensure the accuracy and completeness of the policies mentioned in item (a) above;</p> <p>(c) that I have complied with the provisions of the Insurance Act and directives of Beema Samiti in regard to item (a) above;</p> <p>(d) that I have complied with provisions of the Solvency Margin Directives and guidance notes / guide lines prescribed by the Board there under in the determination</p>	

<p>of the net amount of liabilities;</p> <p>(e) that the reserves of the insurer are adequate to meet all liabilities current and contingent of its policyholders;</p> <p>(f) that the net liability so determined by me is adequate to meet the insurer's future commitments under the insurance contracts, and the policyholders' reasonable expectations.</p> <p>(g) that I have determined the surplus which is Rs..... in respect of participating policies, and Rs..... in respect of non-participating policies.</p> <p>(h) that my recommendation regarding transfer to the shareholders of the insurer is as under (specify):.....</p> <p>(i) that the insurer has/ has not maintained the required solvency margin as per the Solvency Margin directives.</p> <p>(j) that my observations as result of investigation made by me are as under (specify, if any):.....</p> <p>(k) I also declare that ---</p> <p>(1) I have not been held guilty of professional misconduct by my professional body or court or any other body;</p> <p>(2) I have not appointed actuary of any other insurer in Nepal.</p> <p>(3) I do not have any conflict of interest while performing the valuation exercise of the insurer; and</p> <p>(4) I have not furnished any false information in any statement furnished to the Board;</p> <p>[Please note that in case any false information in any statement is furnished in the actuarial returns to the Board, the Board shall have the right to take necessary action on the insurer.]</p>	
--	--

Form No. 3  
**Moment Statistics**

Name of Insurer:  
Reg. Number:  
Date of Registration:  
Valuation Date :

**Statement of Additions and Deletions**

TYPE OF BUSINESS: PARTICIPATING /NON-PARTICIPATING/TOTAL

Furnish this form separately for the participating and non-participating businesses.

Item	Ordinary (Individual) Business—other than annuity business			Group Business –other than annuity business			Annuity Business		Line No.
	No. of Policy	Sums Assured (Rs. 000s)	Vested Bonuses (Rs. 000s)	No. of Policy	Sums Assured (Rs. 000s)	Vested Bonuses (Rs. 000s)	No. of Policy	Annuity p.a. (Rs. 000s)	
1	2	3	4	5	6	7	8	9	
Total Existing at beginning of year									1
New Policies issued									2
Old lapsed policies revived									3
Old Paid up Policies reinstated									4
Old policies changed and increased									5
Bonus Additions allotted									6
<b>Total of Lines 1 to 6</b>									7
<b>Discontinued during the year</b>									8
By Death									9
By survival or the happening of the contingencies insured against other than death (Including Maturity)									10
By expiry of term of term under temporary insurance									11
By Surrender of policy									12
By Lapse									13
By Paid up									14
By Change and decrease									15
By being not taken up									16
<b>Total Discontinued</b>									17
Total Existing at the end of year									18

**Note 1:**

Insurer has issued the following riders and the details at the valuation date are furnished hereunder:

Name of Riders	Number	Face Benefit Amount	Single Premium	Annualized Premium
		(Rs. 000s)	(Rs. 000s)	(Rs. 000s)

**Note 2 :**

Insurer has issued the following linked long-term contracts (permitted by Beema Samiti) and the details are furnished hereunder:

Name of contract	Number	Net Asset Value	Single Premium	Annualized Premium
		(Rs. 000s)	(Rs. 000s)	(Rs. 000s)

Note: please read the instructions for filling up the form carefully.

- Form 3 shall not include information in respect of riders, and also the linked benefit (which is net asset value and not known in advance), for which the information has to be furnished under tables mentioned in the Form 3.
- Columns 2 to 4 represent the data in respect of the Individual policies issued by the insurer; Columns 5 to 7 in respect of group business, and columns 8 to 9 in respect of Annuity Business. The data in respect of Individual and Group Businesses should be exclusive of annuity business. Pension business should be included under annuity business.
- Columns 2, 5, and 8 represent the number of insurance contracts issued, in case of Individual Business, the number of policies, in case of group business, the number of master policies (or group contracts), in case of annuity business, the number of insurance contracts which could be individual or group insurance contracts.
- Columns 3 and 6 represent the Sums Assured. In case of Individual/Group Business, the face amount of the insurance contract—basic sums assured.
- Column 9 represents the amounts of annuity p.a. indicated in the insurance contracts. This is required to be furnished for the immediate annuity contracts as well as deferred annuity contracts.
- Columns 4 and 7 represent the Vested Bonuses—the bonuses so far vested and attached to the policy, and shall not include the annual bonuses allotted as per the actuarial valuation at the valuation date immediately prior to the current valuation date which gets reflected under item Line 6-Bonus additions allotted. This must not include the bonuses which have already been paid or payable in cash to the policyholders, as the same got reflected in the insurer's revenue account. These columns represent the amounts which are definitely payable at a future date along with the sums assured.
- Line 1 represents the carry forward of the last year's figures, and thus become the opening figures for the current year. Line 18 represent the closing figures at the valuation date, and means that the insurer has the policy records for which there exist a policy liability as at the

- valuation date. Line 2 represents the new contracts issued during the year. Please note that there will not be any bonuses vested to these contracts.
8. Line 3 represents the revivals of those policies which have been issued before the valuation date but lapsed on account of policy conditions under which there is no liability on the part of insurer in case of lapse. Please note on revival, the policy gets the status of a new policy with the Sum Assured, and Bonuses vested if any, therefore furnish the columns 2, 3, 4, if required, 5, 6, 7 if required, 8 and 9.
  9. Line 4 represents the reinstatements of those policies which have become paid-up on account of policy conditions under which there is some liability on the part of insurer in case of paid-up status. On reinstatement, the balance sum assured which the insurer was not liable before reinstatement gets revived after the revival as per policy conditions. Columns 2,5, and 8 (the number) are not required to be furnished, as these policies are already on the books of the insurer. Columns 3,4 if required, 6,7 if required, 9 are required to be furnished. This means that a paid-up policy was included in the Line 1 but for a reduced sum assured, and on reinstatement of this policy, the balance sum assured gets reinstated and gets reflected in Line 4, so that this policy comes into force with the original sum assured.
  10. Line 5 represents for the policies shown in Line 1, there was an increase in Sum Assured (and/or Vested Bonuses) which is required to be added as per policy conditions. For instance, a policy shown in Line 1 has a sum assured of Rs.10000, and as per policy conditions, this policy gets its sum assured cover increased to Rs. 15000, by Rs. 5000, then there is an increase of Rs. 5000 which is required to be shown in Line 5. Columns 2, 5, 8 are not required to be furnished. Columns 3,4, if required, 6,7 if required, 9 are required to be furnished.
  11. Line 6 represents the 'Bonus Additions' for those policies which were included in Line 1 and which are required to be allotted the bonus declared at the previous valuation date and which was not so far attached to the policy in the Line 1. For instance, a policy was eligible for a bonus addition of Rs. 500 as a result of previous valuation, and this amount was not attached at the previous valuation date (this bonus liability arises only in the current year) and for the purpose of the current valuation date, the liability of Rs. 500 should be taken into account as at the valuation date. Columns 2,3, 5,6, 8 are not required to be furnished. Only Columns 4,7, and 9 are required to be furnished for those policies which are entitled for bonus additions in the current valuation year.
  12. Line 9 to Line 16 represents the information in respect of policies which are going out of the records of the insurer during the valuation year.
  13. Line 9 represents the 'death claims' as result of which the numbers and amounts are going out of the records of the insurer.
  14. Line 10 represents the maturities or survival benefits as a result of which the numbers and amounts are going out of the records of the insurer.
  15. Line 11 represents the details of the term insurance contracts which are going out of records.
  16. Line 12 represents the information in respect of policies which have been surrendered during the valuation year, and as a result of surrender, the benefits attached to the policies are going out of the records of the insurer.
  17. Line 13 represents the information in respect of policies which have been lapsed during the current valuation year on accounts of policy conditions and have gone out of the records of the insurer. As a result, the basic sum assured, and the vested bonuses, if any, shall go out of the records of the insurer, in his register of policies.

18. Line 14 represents the information in respect of policies that have become paid-up during the current valuation year on account of policy conditions, and these policies would not go out of the records of the insurer, since the insurer is liable for reduced benefits under the policy as per policy conditions. Only the sum assured portion for which the insurer is not liable will get discontinued during the valuation year. Columns 2, 5,8 must not be furnished. Columns 3, 6, 9 are required to be furnished. However, please see the instruction number 9 too for more understanding.
19. Line 15 represents those policies for which the basic sum assured stands reduced in the current valuation year on account of policy conditions. This means that for a policy included in Line 1, the insurer is obliged to pay for reduced benefits. For instance, a policy included in Line 1 is with a basic sum assured of Rs. 10000, and as per policy conditions, the basic sum assured stands reduced to Rs. 8000 as per policy conditions, and the insurer is liable for this policy for basic sum assured of Rs. 8000 from the date of change, and as a result the amount of Rs. 2000 is going out of the records of the insurer. Columns 2, 5, and 8 must not be furnished. Columns 3,4 if required, 6,7 if required, and 9 should be furnished. In the example of this policy, column 3 is Rs. 2000, and as a result, as at the end of the year, this policy stands in force for a sum assured of Rs. 8000.
20. Line 16 represents those policies which have been taken either at the start of the year or during the year (which might be in Line 1 or Line 2), but going out of the records before the valuation date, on account of policy conditions. For instance, a policy which was issued on account of receipt of premium cheque, is not taken up during the valuation year, since the cheque was dishonored and the premium had not been paid at all during the year. There could be instances where the policyholder wants the insurer to cancel the policy, and these could get reflected in Line 16 if these have been included in Line 1 or Line 2.
21. Columns 2, 5,8 must be furnished in units. Columns 3,4,6,7, and 9 must be furnished in 000s, and in NPR.
22. This form is for the business transacted in Nepal. In case, the insurer transacts the business outside Nepal, this form has to be furnished, as far as possible, converting the currencies into NPR. for the business done by the insurer outside Nepal.
23. Insurer might have issued riders providing additional benefits in addition to the basic sum assured mentioned in the insurance contract; and in respect of the riders, the insurer must furnish the data as specified in the Note to enable the appointed actuary to determine the net liability.
24. In case of 'linked long term' contracts, insurer may furnish the 'death benefit which is payable to the policyholders under the columns 3 and 6 (Sum Assured), and information must also be furnished in a separate table in the Form 3 giving the number of linked long term contracts, the net asset value payable, and premiums under the underlying contracts.

Names and Signatures of Principal Officer.

Place

Date

Company Seal

**Form No. 4**  
**Lapsed policy Statistics**

Name of Insurer:

Reg. Number:

Date of Registration:

Valuation Date :

Statement of Lapse Policy

TYPE OF BUSINESS: INDIVIDUAL / GROUP / ANNUITY BUSINESS

LAPSES/PAID UPS/REVIVALS/REINSTATEMENTS

Financial year in which the policies were issued	Lapses/ Paid ups in Year 2017.18			Revivals / Reinstatements in Year 2017.18			Line No
	No.	Sum Assured/Annuity p.a. (Rs. 000s)	Vested Bonuses (Rs. 000s)	No.	Sum Assured/Annuity p.a. (Rs. 000s)	Vested Bonuses	
1	2	3	4	5	6	7	8
2074.75 (2017/18)							1
2073.74 (2016/17)							2
2072.73 (2015/16)							3
2071.72 (2014/15)							4
2070.71 (2013/14)							5
2069.70 (2012/13)							6
2068.69 (2011/12)							7
2067.68 (2010/11)							8
2066.67 (2009/10)							9
Total							10

Note: if col (1) were to start from year 2074.75 (2017/18) under Line 1, then Line 2 becomes Year 2073.74 (2016/17), and so on.

1. This Form 4 enables the appointed actuary to determine any additional reserves for lapses that may be revived in future, and enables the insurer to calculate the net lapse ratio, and thus have the knowledge of level of conservation of business.
2. Insurer is required to produce 6 (3 x 2) forms—as indicated under caption: TYPE OF BUSINESS: INDIVIDUAL / GROUP / ANNUITY BUSINESS, and under each Type of Business, one for lapses, and another for paid-ups. Thus, there will be total 6 Forms.
  - Type of Business: Individual Business – Lapses
  - Type of Business: Individual Business – Paid-up
  - Type of Business: Group Business – Lapses
  - Type of Business: Group Business – Paid-up
  - Type of Business: Annuity Business – Lapses
  - Type of Business: Annuity Business – Paid-up
3. This form gives the information in respect of the policies, that have gone out of the records in columns 2 to 4, and also that have been written back to the records in columns 5 to 7 of the insurer during the financial year 2074.75 (2017/18), which have been issued in a particular financial year (2073.74 (2016/17), 2071.72 (2014/15), ... so on.).

4. Line 1 represents the information in respect of the policies issued during the current financial year—2074.75 (2017/18) , Line 2— Year 2073.74 (2016/17), Line 3—Year 2072.73 (2015/16), and so on.
5. If the insurer states as a policy condition, that a policy does not acquire any paid up value unless at least 2 years premiums have been paid, then a policy is said to be ‘lapsed’ if the insurer has not received at least 2 years’ premiums otherwise the policy is to be eligible for reduced benefits under ‘paid-up’ status.
  - In case of Lapses, we can expect the information under columns 2 to 4, in respect of Lines 1 to 3 only, but not under Lines 4 to 9, since the policies issued in the years mentioned under these lines must have paid less than 2 years’ premiums to insurers.
  - In case of Paid-up, we can expect the information under columns 2 to 4, in respect of Lines 4 to 9 only, since the policies issued in the years mentioned under these lines must have paid at least 2 years’ premium, but definitely not under the Lines 1 to 3.
6. There should be a consistency between the Form 3 and the Form 4. Line 10 should get reflected in Form 3 under Line 13 (for lapses) and Line 03 (for revivals of lapses); under Line 14 (for paid-up) and Line 04 (for revival of paid-up).
7. It should be noted that under columns 2 to 4, the amounts going out of the records of the insurer are mentioned, and under columns 5 to 7, the amounts written back to the records of the insurer are mentioned.
8. Columns 2 and 5 shall be mentioned in unit numbers. Columns 3, 4, 6, and 7 in Rs. 000s.
9. The information in respect of riders is not reflected in this form. If the appointed actuary wants the information, the same has to be furnished to him.

Names and Signatures of Principal Officer.

Place

Date

Company Seal

**Form No. 5  
Valuation Results**

Name of Insurer:  
Reg. Number:  
Date of Registration:  
Valuation Date :  
Statement of Valuation Results

TYPE OF BUSINESS: PARTICIPATING BUSINESS / NON-PARTICIPATING BUSINESS / TOTAL

Item	No.	Sum Assured/ Annuity p.a	Vested Bonuses	Gross Premium	Net Premium	Sum Assured/ Annuity p.a	Vested Bonuses	Office Premium	Net Premium	Future Bonuses	Cost of bonus for the inter- valuation period	Cost of Terminal Bonus, Final Bonus, Special Bonus, etc.	Net Liabilities before elimination of negative reserves	Net Liabilities after elimination of negative reserves, but before reinsurance.	Line No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Life insurance		1													
Endowment															
Anticipated															
Endowment Cum Whole life															
Expat Policy															
Whole life															
Special Term															
Others															
Linked long term															2
Annuities															3
Disability Riders															4
Health Riders															5
Pension policies															6
Capital Redemption Contracts															7
Total--before Reinsurance															8



**Please read instructions carefully before the form is furnished to the Beema Samiti.**

1. This form must be furnished for each of the sub-classes of long term insurance business. The Line 4 is for the business of contracts on disability and multiple indemnity, accident and sickness benefits other than that for Lines 1 to 3, and 5 to 7. The Appointed Actuary shall ensure that the data is made available to him by the insurer as the Form requires. The rest are self-explanatory.
2. This form must be furnished for (1) participating, (2) non participating, and (3) total businesses separately.
3. For each Line of Lines 1 to 7, which represent each of the sub-classes mentioned in the said Act, furnish the columns 2 to 11, for each product and riders issued in each sub-class. Information for All riders must be furnished under each sub-class.
4. For Line 2, the Sum Assured, the column 3 should represent the Net Asset Value – the benefit payable under the policy.
5. For Lines 3 and 7, the annuity p.a. must be furnished under column 3. For Deferred Annuity Contracts too, annuity p.a. (which is mentioned in the contract) must be furnished.
6. Columns 2 to 6 must be the original data supplied by the insurer to the appointed actuary. Columns 7 to 11 must be determined by the Appointed Actuary.
7. Line 9 should indicate the Reinsurances for the Lines 1 to 7. In Line 9, Col (2) shall be the number of reinsured policies, Col (3) shall be the amount of risk sum reinsured, col (5) shall be the Gross premium portion in respect of the number of policies mentioned under col (2); col (6) shall be the reinsurance premium (net) paid by insurer to reinsurer; Cols (7) to (10) may be kept blank.
8. Col (6) = Col (5) – Reinsurance Premium.
9. Col (14) = Col (7) + Col (8) + Col (11) – Col (10)
10. Col (15) = Col (14) + Absolute amount of Negative Reserves.
11. Please note that cols (12) and (13) will get reflected in Form No. 7 as allocations, suitably.

Information in respect of negative reserves: Type of Business:	Number	Rs. 000s		
		negative reserve other than Surrender Deficiency Reserve	Surrender Deficiency Reserves	Office Premium
1. Participating Business				
2. Non-participating business				
3. Total				

**Name and Signatures:**

Place

Signature:

Signature

Date

Name of Actuary

Name of Principal Officer :

Company Seal

Fellow of

Appointment date in the Company

**Form No. 6**  
**Valuation Balance Sheet**

**Name of Insurer:**

Reg. Number:

Date of Registration:

Valuation Date :

Valuation Balance Sheet

Item	Participating Business	Non-Participating Business	Total Business	Line No.	Ref.
	(Rs. 000s)	(Rs. 000s)	(Rs. 000s)		Form-Line No.
1	2	3	4	5	6
<b>Assets:</b>					
Life fund as shown in the Balance Sheet				1	
Transfer of Current year's surplus to shareholders shown in the P&L Account, if any				2	
Balance of fund for the purposes of Valuation Balance Sheet: Sum of lines 1 and 2				3	
Deficiency (Negative Surplus), if any				4	
<b>Total</b>				5	
<b>Liabilities:</b>					
Net Liability				6	F5- L23
Surplus, if any				7	
<b>Total</b>				8	

**Please read the instructions carefully before filling up the form.**

1. This form must be furnished for participating and non-participating businesses besides the total business of the insurer, to determine the surplus/deficiency of each business.
2. Columns 2 to 4 against Line 1 must be the amounts as shown in the audited balance sheet.
3. Line 2 shows the amount of transfer of surplus (arising in the current year) to shareholders' funds in the Statement of Income of the Life Insurance Fund, if any.
4. Line 3 shows the amount of Life Insurance Fund which is used by the actuary to determine the established surplus as required under the Act/Directives.

**Name and Signatures:**

Place	Signature:	Signature
Date	Name of Actuary	Name of Principal Officer:
Company Seal	Fellow of	Appointment date in the Company

**Form No. 7**  
**Statement of Surplus Allocation**

Name of Insurer:

Reg. Number:

Date of Registration:

Valuation Date:

Statement of Surplus Allocation

Item	Participating	Non-Participating	Total	Line No.	Ref.
	(Rs. 000s)	(Rs. 000s)	(Rs. 000s)		Form-Line(Col.)
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
<b>Sources</b>					
Valuation Surplus /(Deficiency)				1	F6-7
Surplus brought forward from previous year, if any				2	
Interim Bonuses Paid during the financial year				3	
<b>Total Profits/Surplus available for distribution (sum of lines 1 to 3)</b>				4	
<b>Uses</b>					
Surplus allocated to policyholders for distribution of bonus				5	
Surplus allocated to shareholders				6	
Interim bonuses paid during the financial year				7	
Surplus carried forward				8	
<b><u>Total</u></b>				9	

**Please read the instructions carefully before filling up the form.**

1. This form must be furnished for participating and non-participating businesses besides the total business of the insurer, to determine the surplus allocation for each business.
2. Line 5: Col (2) shall be at least 90% of Column 2 under Line 1

**Name and Signatures:**

Place

Signature:

Signature

Date

Name of Actuary

Name of Principal Officer :

Company Seal

Fellow of

Appointment date in the Company

**Form No. 8  
Specimen Policy Values**

Name of Insurer:  
Reg. Number:  
Date of Registration:  
Valuation Date:  
Statement of Specimen Policy Values

No. of Premiums Paid	Endowment Assurances							Endowment Com Whole Life Assurances					
	X=35; T=25		X=45; T=15		X=55; T=05		Entry Age: 35		Entry Age:45		Entry Age:55		
	Line No.	Reserve Value	MSV	Reserve Value	MSV	Reserve Value	MSV	RV	MSV	RV	MSV	RV	MSV
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	1												
2	2												
3	3												
4	4												
5	5												
6	6												
7	7												
8	8												
9	9												
10	10												
11	11												
12	12												
13	13												
14	14												
15	15												
16	16												
17	17												
18	18												
19	19												
20	20												
21	21												
22	22												
23	23												
24	24												
25	25												

Notes: RV: Reserve Value; MSV: Minimum Surrender Value; X= Entry Age; T=Policy Term

**Name and Signatures:**

Signature:

Signature:

Place

Date

Name of Actuary

Name of Principal Officer:

Company Seal

Fellow of

Appointment date in the Company

**Form No. 9**  
**Bonus rates**

Name of Insurer:  
Regn. Number:  
Date of Registration:  
Valuation Date :  
Statement of Bonus rates declared

Name of the product	Bonus per Rs. 1000 Sum Assured	Remarks, if any
<b>1</b>	<b>2</b>	<b>3</b>

**Name and Signatures:**

Place

Signature:

Signature:

Date

Name of Actuary

Name of Principal Officer:

Company Seal

Fellow of

Appointment date in the Company

**Form No. 10**  
**Solvency**

Name of Insurer:  
Regn. Number:  
Date of Registration:  
Valuation Date:  
Statement of Solvency

Item	(Rs. 000s)		Line	Ref.
	Current Year	Last Year	No.	Form No
Available Solvency Margin			6	10B-L4
Required Solvency Margin (RSM)			7	10A-L8
Solvency Ratio (ASM divided by RSM)			8	

**Name and Signatures:**

Place

Signature:

Signature:

Date

Name of Actuary

Name of Principal Officer:

Company Seal

Fellow of

Appointment date in the  
Company

**Form No. 10A**  
**Required Solvency Margin**

Name of Insurer:  
 Regn. Number:  
 Date of Registration:  
 Valuation Date:  
 Statement of Required Solvency Margin

Item	Amount-1	Factor	RSM	Line No.	Ref.-Form No/Line No.
(1)	(2)	(3)	(4) =(2)x(3)	(5)	(6)
Mathematical Reserves before Reinsurance				1	F5-L24
Mathematical Reserves after Reinsurance				2	F5-L23
Ratio of Line 2 to Line 1				3	
Adjusted Mathematical Reserves		0.03		4	
Sum At Risk		0.002		5	
RSM-1 (Line 4 +Line 5)				6	
RSM-2 (50% of Paid up Capital)				7	
Higher of Line 6 and Line 7				8	

Note: Under Col (2), Line 4 = Line 2 if Line 3 ≤ 0.85, else Line 4 = 0.85 \* Line 1

**Names and Signatures:**

Place

Signature:

Signature

Date

Name of Actuary

Name of Principal Officer:

Company Seal

Fellow of

Appointment date in the  
Company

**Form No. 10B**  
**Available Solvency Margin**

Name of Insurer:

Regn. Number:

Date of Registration:

Valuation Date :

Statement of Available Solvency Margin

Item	Amount	Line No.	Ref.- Form No/Line No.
(1)	(2)	(3)	(4)
Admissible Assets		1	F11-L23
Mathematical Reserves after Reinsurance		2	F5-L23
Other Liabilities		3	B/sheet
Available Solvency Margin		4	

Note: Line 4 = Line 1 - Line 2 - Line 3

**Name and Signatures:**

Place

Signature:

Signature:

Date

Name of Actuary

Name of Principal Officer:

Company Seal

Fellow of

Appointment date in the  
Company

**Form No. 11**  
**Admissible Assets**

Name of Insurer:

Regn. Number:

Date of Registration:

Valuation Date :

Statement of Admissible Assets

Item	Balance sheet value at valuation date	Market Value or Realizable Value at valuation date	Higher/Lower of (2) & (3)	Factor	Admissible Value	Line No.
(1)	(2)	(3)	(4)	(5)	(6)	(8)
Government Securities						1
Fixed Deposit of Commercial Bank						2
Fixed Deposit of Development Bank						3
Investment in Mutual Fund						4
Investment in Real state						5
Preference Shares Secure Debentures and Other Debentures of Commercial Banks, Development Banks & Finance Companies						8
Fixed Deposit of Finance Company						9
Ordinary Shares of Public Limited Company						10
Others						11
Others						12
Others						
Total Investment						13

Note: Please note that this amount of admissible assets determined under this Form 11 shall not exceed the amount of admissible assets determined by the Principal Officer as per the Investment Directive. The factor under this form shall be as per investment guidelines.

**Name and Signatures:**

Signature:

Signature:

Place

Date

Name of Actuary

Name of Principal Officer:

Company Seal

Fellow of

Appointment date in the  
Company

Certificate from Company's Auditor.

The contents of the Form 11: Admissible assets give true and fair view of the company's Admissible assets.

Signature

Name of Auditor

Fellow of

Membership No.

COP No.

Appointed from:

**Form No. 12**  
**Sensitivity Analysis**

Name of Insurer:  
Reg. Number:  
Date of Registration:  
Valuation Date :  
Statement of Sensitivity Analysis

Item	Total Net of Reinsurances [total net liability]-- Line 22+Line 10	Rate	Line No.	Ref
1	2	3	4	5
Discount rate--Base			1	F5-L23
Discount rate--Base +1%			2	
Discount rate--Base -1%			3	
Solvency Ratio - based on discount rate - base			4	
Solvency Ratio - based on discount rate - base + 1%			5	
Solvency Ratio - based on discount rate - base - 1%			6	
Mortality rate-Base			7	F5-L23
Mortality rate-150% of Base			8	
Mortality rate-50% of Base			9	
Solvency Ratio-Mortality rate-Base			10	
Solvency Ratio-Mortality rate-150% of Base			11	
Solvency Ratio-Mortality rate-50% of Base			12	

**Name and Signatures:**

	Signature:	Signature:
Place		
	Name of Actuary	Name of Principal Officer:
Date		
	Fellow of	Appointment date in the Company
Company Seal		

**Form No. 13**  
**Cash Flow Statement**

Name of Insurer:  
Reg. Number:  
Date of Registration:  
Valuation Date:  
Statement of Cash Flow

Item	Expected Fund	Investment Income	Other Income	Total Fund	Outgo				Increase in Liability	Management Expenses	Surplus/ (Deficiency)
					Death Claims	Surrenders	Maturities	Others			
At the end of year x from the Valuation date (x)											
1											
2											
3											
4											
5											

**Name and Signatures:**

Place	Signature:	Signature:
Date	Name of Actuary	Name of Principal Officer:
Company Seal	Fellow of	Appointment date in the Company

**Form No. 14**  
**Insurance policy statistics**

Name of Insurer:  
Reg. Number:  
Date of Registration:  
Valuation Date:

Statement of Insurance policy statistics

Age at valuation date	With-Profit Business					Without-Profit Business				
	No. of policies	Sums Assured	Vested Bonuses	Annualized Premium	Single Premium	No. of policies	Sums Assured	Annualized Premium	Single Premium	
0										
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										

29										
30										
31										
32										
33										
34										
35										
36										
37										
38										
39										
40										
41										
42										
43										
44										
45										
46										
47										
48										
49										
50										
51										
52										
53										
54										
55										
56										
57										
58										
59										
60										
61										
62										
63										
64										
65										
66										
67										
68										
69										

70										
71										
72										
73										
74										
75										
76										
77										
78										
79										
80										
81										
82										
83										
84										
85										
86										
87										
88										
89										
90										
91										
92										
93										
94										
95										
96										
97										
98										
99										
100 and above										

**Name and Signatures:**

Place

Signature:

Signature:

Date

Name of Actuary

Name of Principal Officer:

Company Seal

Fellow of

Appointment date in the

Filename: Final valuation directive, 2076 (2076-05-20)  
Directory: C:\Users\msi\Downloads  
Template: C:\Users\msi\AppData\Roaming\Microsoft\Templates\Normal.dotm  
Title:  
Subject:  
Author: others  
Keywords:  
Comments:  
Creation Date: 4/28/2019 3:07:00 PM  
Change Number: 298  
Last Saved On: 9/6/2019 12:03:00 PM  
Last Saved By: msi  
Total Editing Time: 645 Minutes  
Last Printed On: 9/6/2019 12:04:00 PM  
As of Last Complete Printing  
Number of Pages: 37  
Number of Words: 7,532 (approx.)  
Number of Characters: 42,933 (approx.)