

**Format-3**  
**NEW INDIA ASSURANCE COMPANY LIMITED**  
**401 & 402 4<sup>th</sup> FLOOR, ALKARIM TRADE CENTRE, M.G.ROAD,**  
**RANIGUNJ, SECUNDERABAD - 500003**

TSSGDCFL SHEEP INSURANCE MASTER POLICY NO. \_\_\_\_\_ / NIA/2021  
CERTIFICATE OF INSURANCE NO. \_\_\_\_\_ .

**TAG LOSS INTIMATION FORM UNDER TSSGDCFL -SRDP SCHEME**

**INTIMATION BY BENEFICIARY**

Date :

Name of the beneficiary : \_\_\_\_\_

Father / Husband's name: \_\_\_\_\_

Village & Mandal : \_\_\_\_\_

District : \_\_\_\_\_

To  
The Veterinary Asst., Surgeon / Para- staff  
Primary Veterinary Centre / SCAH ,  
\_\_\_\_\_

(or)

President ,  
Name of Sheep Society: \_\_\_\_\_,  
Village: \_\_\_\_\_  
Mandal: \_\_\_\_\_

**Sub: LOSS OF EAR TAG NO. \_\_\_\_\_ OF MY SHEEP**

I hereby bring to your kind notice that sheep ear tag No. \_\_\_\_\_ of my sheep covered under certificate of insurance No. \_\_\_\_\_ is lost / broken on \_\_\_\_\_. I request you to kindly retag my sheep.

*Signature of beneficiary.*

**CERTIFICATE BY VAS / PARA-STAFF/ PRESIDENT OF PSBCS**

- A) Date & Time of receipt of request from beneficiary : \_\_\_\_\_  
B) Retagging done on : \_\_\_\_\_  
C) Retagged ear tag No.: \_\_\_\_\_  
D) Date of intimation about retagging to Fouress Agency / New India Assurance Company Ltd: \_\_\_\_\_

I hereby certify that above sheep belonging to Sri / Smt. \_\_\_\_\_ of \_\_\_\_\_ village , \_\_\_\_\_ Mandal, \_\_\_\_\_ District has been retagged with new tag No. \_\_\_\_\_ replacing old tag No. \_\_\_\_\_.

Place :  
Date:

*Signature and Seal of VAS /  
Para- Staff / President of Sheep Society*