|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| to JSC RNRC  **NOTICE OF LOSS** | | | | | | | | \_\_\_ /\_\_\_\_\_ /\_\_\_\_\_ | | |
| date of filing | | |
| On behalf of the Reinsured (Cedent): | | | | Details | | | | | | |
| **\_** | | | | Legal address \_  INN (Taxpayer’s ID): \_  Settlement account: \_  with bank \_  BIC: \_  Corr. account: \_ | | | | | | |
| **Reinsurance contract (slip) No.** | | | **\_** | | | | |  |  | |
|  | | | (Ref. of the Reinsured) | | |  | | |  | |
| **EVENT INFORMATION** | | | | | | | | | | |
| Date of event:  **\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_** | | Name of the Insured (under the master insurance contract) | | | | | | | | |
| **\_** | | | | | | | | |
| Nature, circumstances, brief description of event: | | | | | | | | |
| \_ | | | | | | | | |
| Amount of the reported loss (if any) and/or amount of the provision (RBNP) set: | | | | | | | | |
| **\_** | | | | | | | | |
| Current status of the settlement and/or actions planned/carried out by the Reinsured: | | | | | | | | |
| \_ | | | | | | | | |
| Terms of settlement (under the terms of the reinsurance contract (slip) | | | | | | | | | | |
| “Follow  the fortunes” | “Follow decisions and actions” | | | | “Cooperation in loss settlement” | | | | | “Loss control” |
| Amount of RNRC share loss: | | Contact details of the officer of the Reinsured for instant communication | | | | | | | | |
| **\_** | | \_ | | | | | | | | |
| Full name and title of the representative of the Reinsured | | | | | Signature | | | |
| \_ | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **L. S.** | | | |

|  |  |
| --- | --- |
| For RNRC’s use only |  |
| **\_** | \_ |