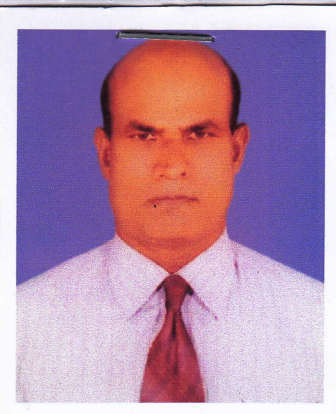


Not Transferable

**FORM - VI E**  
Sec Rule 18 E (C)



**GOVERNMENT OF THE PEOPLES REPUBLIC OF BANGLADESH**  
**DEPARTMENT OF INSURANCE.**

LICENCE NO: ..... ৪৭/২১ ..... (GENERAL)

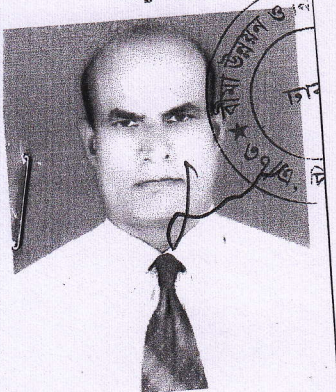
Mr./Mrs./Miss: ..Md. Asaduzzaman.....

S/o. W/o. D/o: ..Md. Anisur Rahman.....

Village: ..Kawlapur..... Post Office ..SeSallaha.....

Thana: ..Amanoum..... District ..Satkhira.....

Is hereby authorised to act as an Insurance Agent in respect of General Insurance Business for one year from ..... ২১/০২/১৭ ..... Dhaka, date the ..... ২৭/০৬/১০ ..... day of .....



*Signature*  
Signature of the Applicant

Dated: ২২.০১.২০১৭

*Signature*  
Signature of  
Chairman  
or  
Authorised Officer in this  
behalf

12 JUN 2017

মোঃ শাহ আলম  
পরিচিতি নং-৩৮১৬  
পরিচালক (উপসচিব)  
বাংলা উন্নয়ন ও নিয়ন্ত্রণ কর্তৃপক্ষ