

## Sector Name: INSURANCE - Bug #2655

Schedule 5-->after save attached document from All question is getting disappear.

06/14/2022 03:07 PM - arti saraswat

|                        |             |                        |            |
|------------------------|-------------|------------------------|------------|
| <b>Status:</b>         | Closed      | <b>Start date:</b>     | 06/14/2022 |
| <b>Priority:</b>       | Immediate   | <b>Due date:</b>       |            |
| <b>Assignee:</b>       | sunil gupta | <b>% Done:</b>         | 0%         |
| <b>Category:</b>       |             | <b>Estimated time:</b> | 0.00 hour  |
| <b>Target version:</b> |             | <b>Spent time:</b>     | 0.00 hour  |

### Description

Schedule 5-->after save attached document from All question is getting disappear.

28. Give the names, addresses and telephone numbers of three referees, including a financial institution. Referees should not be relatives. They should be informed that the Commission might wish to contact them.

Add Row

| S.No | Reference Type | Name Of Company  | Name Of Contact Person | Address1     | Address2       | City        | State        | Country        | Zip Code   | Telephone  | Email         | Action |
|------|----------------|------------------|------------------------|--------------|----------------|-------------|--------------|----------------|------------|------------|---------------|--------|
| 1    | Personal       | Qus.28 Name Of C | aaaaaaaa               | bbbbbbbbbbbb | cccccccccccccc | ddddddddddd | eeeeeeeeeeee | ffffffffffffff | zip1000bnv | 2147483647 | a@yopmail.com |        |
| 2    | Professiona    | Qus.28 Name Of C | AAAAAAA                | BBBBBB@1     | CCCCCCCCCCCC   | DDDDDDDDDD  | EEEEEEEEEEEE | FFFFFFFFFFFFFF | ZIP200000  | 2147483647 | B@YOPMAIL.CO  |        |
| 3    | Financial      | Qus.28 Name Of C | PPPPPPPPPP             | QQQQQQQQQC   | RRRRRRRRRRRf   | SSSSSSSSSS  | TTTTTTTTTTTT | UUUUUUUUUUU    | ZIP20000   | 2147483647 | C@YOPMAIL.CO  |        |

#### Declaration

I certify that to the best of my knowledge and belief the information given in this form is complete and correct:

Date

06-14-2022

Upload Signed document.



#### AUTHORISATION TO SEEK ADDITIONAL INFORMATION

I/We hereby authorise you to contact all relevant authorities and authorise said authorities to provide you with whatever information you may request.

Date

13-06-2022

Upload Signed document.



### History

#1 - 06/14/2022 05:14 PM - sunil gupta

- Status changed from New to Resolved

#2 - 06/14/2022 06:15 PM - arti saraswat

- Status changed from Resolved to Closed

### Files

clipboard-202206141507-yzbsa.png

94.4 KB

06/14/2022

arti saraswat