PERIODIC DISCLOSURES

FORM NL-27 OFFICE INFORMATION

Name of the Insurer: ICICI Lombard General Insurance Company Limited

Registration No. 115 dated August 03, 2001

Statement as on December 31, 2012

SI. No.	Office Information	Number
1	Number of offices at the beginning of the Qua	arter 309
2	Number of branches approved during the per	eriod -
3	Number of branches Out of approvals	of previous Year -
4	opened during the Quarter Out of approvals	of this Quarter -
5	Number of branches closed during the Quarter -	
6	Number of branches at the end of the Quarte	er 309
7	Number of branches approved but not opened -	
8	Number of rural branches	-
9	Number of urban branches	309