

**National Insurance Company Ltd**  
**Grounding Details of Sheep Units**

Format -3

District :

Society Name :

Veterinary Doctor Name:

Place of Grounding :

Date of Grounding:

S.No.	Name of the beneficiary	No of Units Grounded	No of sheep	Tagging done (Y/N)	Animal health	Photos Captured(Y/N)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

I / We here by certify that the above details are true to the best of our knowledge, that all the above animals are healthy and have been vaccinated for various diseases periodically as per the schedule. I / We here by certify that all the animals are properly tagged in our presence and VISA Photo of every animal along with group photo with beneficiary are taken for uploading into the software application.

Date : \_\_\_\_\_

**Signature and seal of the Veterinary Doctor**