

FORM B: CONSENT FORM

The Chief Executive Officer/Compliance
Officer Bhutan Insurance Limited
Chorten Lam
Post Box No.:-
779 Thimphu:
Bhutan

I, the undersigned, consent to my nomination as Directors in Bhutan Insurance Limited made by the following shareholder(s):

- 1.
- 2.
- 3.
- 4.
- 5.

Name of Candidate :
Candidate's mailing address :
Telephone Number :
Mobile Number :
Fax Number :
Email :
CID Number :

Place :
Date :

Signature