



Solarelle Insurance Pvt. Ltd.
1st Floor, H. Fathangumaage,
Sosun Magu,
Male', republic of Maldives

We're Hiring a Audit Manager

Position Name: Claims Associate - General	Announced On: August 31, 2026	Special Requirements: ❖ Only Maldivian Citizens
Location: Solarelle Head Office, Male', Maldives	Application Deadline: September 6, 2026	

We are looking for an experienced, technically competent and customer-focused professional to join our Claims Department as Claims Associate – General.

Claims Associate plays a key role in the initial stages of the claims processing workflow, supporting the overall efficiency and effectiveness of the claims department.

Responsibilities

1. Claims Intake and Documentation:
 - Receive and review insurance claims filed by policyholders or third parties.
 - Ensure all necessary documentation is submitted and complete, including incident reports, photos, and other relevant information.
2. Data Entry and System Updates:
 - Enter claims data into the company's claims processing system.
 - Regularly update and maintain accurate records of claim information.
3. Communication:
 - Communicate with policyholders, claimants, and relevant stakeholders to gather additional information or clarify details.
 - Provide timely and courteous responses to inquiries regarding claim status or documentation requirements.
4. Investigation Support:
 - Assist in the initial stages of claims investigations by gathering preliminary information.
 - Work collaboratively with claims adjusters and investigators to support the evaluation of claim validity.
5. Adjudication Assistance:
 - Provide support in the claims adjudication process, preparing claims files for review.
 - Collaborate with seniors to ensure accurate and timely claim assessments.
6. Customer Service:
 - Address basic inquiries and concerns from policyholders or claimants.
 - Offer clear and concise information regarding the claims process and next steps.

7. Record-Keeping:
 - Maintain organized and up-to-date records of claims processing activities.
 - Ensure compliance with documentation standards and regulatory requirements.
8. Collaboration:
 - Work as part of a team to ensure smooth workflow and efficient claims processing.
 - Collaborate with other departments, such as customer service, underwriting, sales, finance and legal to facilitate the resolution of issues related to claims.

Requirements

EDUCATION & QUALIFICATION:

- Higher Secondary / Secondary School Graduation
- Basic understanding of insurance policies and claims processing procedures.
- Familiarity with insurance terminology and regulations.
- Proficiency in Microsoft Office and insurance management systems.

SKILLS AND EXPERIENCE:

- Effective communication, and good interpersonal skills.
- Strong attention to detail and accuracy in data entry and documentation.
- Ability to learn and adapt to new software and systems.
- Familiarity and understanding relevant and frequently used terms in insurance and related lines.

Please note: An attractive and competitive remuneration package, inclusive of Staff Medical Insurance benefits, will be offered based on qualifications and experience.

Please note: Only shortlisted candidates will be contacted for interviews.

To Apply

Please send your complete CV, copy of National ID card, police report, educational certificates (attested), and reference letters on or before 6th September 2026 17:00 hrs.

HR & Administration Department
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