LIFE INSURANCE CORPORATION OF INDIA

NAVY PERSONNEL QUESTIONNAIRE

Proposal No	FORM NO. LICUS - 303
Name of the Life to be assured	
Give particulars regarding the branch of the Naval Forces, etc. which you belong and your present rank?	to
2. A. Are you at present engaged in:	
 a. Any flying duties as a pilot or member of aircrew or other duties requiring you to remain on board an airc otherwise than as a passenger for the purpose of transport b. Duties as a paratrooper c. duties as a Glider pilot or 	
d. duties as a member of aviation operating personnel of ground personnel	or
B. Were you engaged in the past in any of the duties mentione under (A) above, and if so, are you likely or liable to return the same in future?	
C. Have you undergone or are you now undergoing training fo any of the duties mentioned under (A) above?	r
D. Have you, under the terms and conditions, of your service, special liability to engage in Aviation, Gliding or Parachuti	
N.B The liability referred to herein is not the general liability imposed on all Defence Service Personnel in terms of which they be called upon to make up any type of work in any of the Defence Services.	
3. Are you a member of any Flying or Gliding Club? If so, state:	
a. whether you are undergoing training in flying or gliding whether you have completed such training?	or
b. the number of flights made per annum	
t	

4. A. Have you ever been or do you intend to or are likely to be engaged to do any work in a submalayer or Minesweeper and if so, in what capacitations.	arine, Mine- ity?	
B. Have you received any training or are you liab receive any training to work in a submarine, m Mine-sweeper? If so, give details		
5. A. Have you ever been required to or do you inten liable or likely to do diving in the course of you		
B. State the maximum depth upto which you have been trained to dive and number of dives under the last 12 months		
DECLARATION		
I do hereby declare that the foregoing statements and answers are true in every particular and agree and declare that these statements and this declaration along with my Proposal for Insurance and the Declaration relative thereto shall form the basis of the contract between me and the Life Insurance Corporation of India and that if any untrue averment be contained therein the said contract shall be absolutely null and void and moneys which shall have been paid in respect thereof shall stand forfeited to the Corporation.		
Dated aton theday of	200	
Signature of Witness Occupation Address	Signature of the Life to be assured	
In case the Proposer is illiterate:		
1. This declaration should be made by the person filling in the form:		
I hereby declare that I have fully explained the above questions to the proposer & I have truthfully recorded the answers given by the proposer.		
Address of the Declarant	Signature	
2. The thumb impression of the proposer should be attested by a person of standing whose identity can be easily established, but unconnected with the Corporation and this declaration should be made by him:		
I hereby declare that I have explained the contents of this form to the proposer in(language) and that I have read out to the proposer the answers to the questions dictated by the proposer and that the proposer has affixed his thumb impression to this form after fully understanding the contents thereof. Address of the Declarant Signature		
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