



QUESTIONNAIRE

SECTION A: PARTICULARS OF LIFE ASSURED

Name

Identity Card / Passport No. Contract No.

SECTION B: QUESTIONS

1. Are you completing this form using information supplied by your client or from your own knowledge of his / her business or financial status?

2. What is the purpose of this insurance?

Keyman protection Loan protection Employee benefit

Others, please specify

3. How is the amount of Sum Assured derived?

4. Please provide business details:

(a) Name of business

(b) Nature of business

(c) Business commencement date

(d) Designation and duties of Life Assured

(e) Percentage of Life Assured's ownership

5. Is there any concurrent proposal(s) on the Life Assured?

Yes No

If 'Yes', please provide details of insurance (eg insurer, plan & amount of insurance cover).

6. Please provide a brief account of the Life Assured's home environment, business activities, lifestyle and reputation.

7. Is there any other information which may be helpful to the underwriter?

Yes No

If 'Yes', please provide details:

SECTION C: DECLARATION

I declare that the information given is true and complete and that I have not withheld any material information that may influence the assessment of my client's application.

Name and Signature of Adviser

Date (dd/mm/yyyy)