

From No. 32851 - Special Moral Hazard Report to be
Completed where the Sum Proposed is in excess of Rs. 15 lakhs.

ANNEXURE A



भारतीय जीवन बीमा निगम
Life Insurance Corporation of India

Established by the Life Insurance Corporation Act 1956.

Proposal No.

INSTRUCTIONS :-

- (1) Before completion of the report the reporting official should satisfy himself regarding the identity of the proposer. He should meet him preferable at his residence before completing the report. The reporting official should make independent enquiries about the life to be assured's health and habits, occupation, income, social background and financial position ect.

This report must be completed immediately after the enquiries are made.

1. Full Name of the Proposer :-

_____ Age _____ Years

Full Name of Life to be Assured:- _____ Age
_____ Years

Occupation _____ (Give exact nature of duties or nature of
business)

Sum Proposed _____

Full Address

2. Total previous insurance in force :-
Sum Assured Rs. _____

3. Total insurance premium per year
For previous Rs. _____

4. (a) By whom were you introduced to the Proposer/Life Proposed? (a) _____
- (b) Are you satisfied about the identity of the Life Proposed? (b) _____
- (c) Give marks of identification, if any (c) _____
- (d) Does the life proposed look older than the declared age? (d) _____
- (e) What is the educational qualification of the life to be Assured? (e) _____
- (f) What is your assessment about the general state of health of the life to be Assured? (f) _____
- (g) Has he any physical deformity or impairment? (g) _____
- (h) Does your enquiry indicate of his having suffered from any illness or injury or undergone any operation or hospitalisation or medical investigation in the past? (h) _____
- If so, give detail
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5. Are you satisfied that no previous policy has Lapsed within last three years on the life of the Proposer / Life proposed, his family member. (The Reporting Official is expected to examine the entire family insurance portfolio)
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6. (a) What is proposer's yearly income from all sources (before tax)
- (i) Employment : Rs. _____
- (ii) Business or profession : Rs. _____
- (iii) Agriculture : Rs. _____
- (iv) Investments : Rs. _____
- (v) Property : Rs. _____
- (vi) Any other source : Rs. _____
- (Give detailed, and accurate information about the nature of source)
- (b) Give information about the Income, Total insurance in force, and Total Premium amounts per year for the Family members of the proposer.

	Yearly Income from All sources. (before Tax)	Total Insurance in force	Premium per year
i) Father			
ii) Mother			
iii) Wife			
iv) H.U.F.			
Of self			
Of father			

(If it is noticed that any earlier policies belonging to any one including the proposer's are financed from any of the H.U.Funds, then give detailed information on the premium amounts so paid, which H.U.F financed and what are the premium amounts)

(c) Give information about the income, total insurance in force and total premium amounts per year for the children of the proposer

	Age	Yearly Income from All sources (before tax)	Total Insurance in force	Premium paid per year
Sons				
(i)				
(ii)				
(iii)				
Daughters				
(i)				
(ii)				
(iii)				

(d) give the figures of Income Tax Paid, Total Assets (excluding Life Assurance) & Total liabilities of the Proposer / Life Proposed & Family Members.

	<u>Income Tax</u>	<u>Assets</u>	<u>Liabilities</u>
i) Proposer			
ii) Life Proposed			
iii) Father			
iv) Mother			
v) Wife			
vi) Sons			
1)			
2)			
3)			
vii) Daughters			
1)			

- 2)
- 3)

(e) is he or his business solvent?

(f) State full particulars of the documents verified (Remarks such as "as told by the party, agent ect." Will not be accepted.)

7. (a) Is there anything in the life to be assured's occupation, financial or social position personal hebits or any other circumstances which might add to the risk? (a) _____
- (b) Do you consider acceptance of the proposal As in order and recommend it as such? (b)_____
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I hereby declare that the foregoing statements are true and correct and are made as a result of my detailed enquireies and on verification of documentary evidence.

Place : _____

Signature : _____

Date : _____

Name : _____

Designation : _____

Address : _____
