LIFE INSURANCE COPORATION OF INDIA -----DIVISION

(SPECIAL MORAL HAZARD REPORT)

Proposal No.
Branch Office

INSTRUCTIONS:

Before completion of the report the reporting official should satisfy himself regarding the identity of the Proposer. He should meet him, preferably 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 etc.

This report must be completed immediately after the enquiries are made

1.	. Full Name of the pro	poser	Ageyears
	Full Name of the life	to be assured	Ageyears
	Full Address		
	Mobile no. and emai		
	Occupation/Exact Na	ature of Duties/Business	
	Sum proposed		
2.	Total previous insura	ance in force (Sum Assured)	Rs
3.	Total insurance pren	ium per year for previous policies	Rs
4.	(a) By whom were y	ou introduced to the Proposer/ Life proposed?	(a)
	(b) Are you satisfied	about the identity of the Life proposed?	(b)
	(c) Give marks of ide	entification, in any	(c)
	(d) Does the life pro	posed look older than the declared age?	(d)
	(e) What is the educ Assured?	ational qualification of the life to be	(e)
	(f) What is your ass Of the life to be	essment about the general state of health assured?	(f)
	(g) Has he/she any	physical deformity of impairment?	(g)
	Illness or injury	ry indicate his having suffered from any or undergone any operation or or medical investigation in the past?	(h)
5.	Are you satisfied the Three years on the	at no previous policy has lapsed within last ife of the proposer/life proposed & his family ed - whether applied for revival simultaneousl	
	(The reporting office	ial is expected to examine the entire family In	surance portfolio)

			from (I) Employment:	Rs		
	ll sources (before		(ii) Business or	_		
	rive detailed, an	d accurate ut the nature of	Profession	Rs		
	Source)	at the nature of	(iii) Agriculture	Rs		
	,	(Agricultu	re income as per Tahsild			
		(1181100110	Certificate /Crop Receip			
				,		
			(iv) Investments	Rs		
			(v) Property	Rs		
			(vi) Any other sour	rce Rs		
			Total	D.		
			Total	KS		
(b) Giv	e detailed & acc	curate Information	about previous in force	Insurance of propo	oser as	
u.	idei.	To	otal Sum Assured	Total Yearl	v Premium	
		1	otal Balli Pissarea	Total Teal)	y i icilitani	
i)	Individual			-		
ii)	KMI					
iii) I	Employer-Employer	oyee			,	
	artnership					
v) I	nsurance from p	private companies				
() () :						
(c) Giv	e information a				remium	
	family member	rs .	All sources	in force	per year	
i)	Father.		(Before Tax)			
ii)						
iii		shand		,		
iv						
	i)					
	ii)					
	iii)					
v)	Daughter	'S				
	i)					
	ii)					
	iii)					
(T		1:0:0:11 11.11				
(In case of	proposed on mi	inor life if all sibli	ngs are not adequately in	isured reason for	the same.)	
vi)	HUF det	tails of	Yearly Income from	Total insurance	Premium	
**/	nor de	uilis of	HUF (Before Tax)	in force	per year	
	i) Self		Tier (Before run)	111 10100	per year	
	,	Members				
			id, Total Assets (excludi	ng life assurance)	& Total Liabilities	sof
	The proposer, I	Life proposed & fa	mily members.			
			T		Y 1.1 1151	
			Income Tax	Assets	Liabilities	
	i) Propos	er				
	i) Flopos	501				
	ii) Life pı	roposed				
	Zire pi					
	iii) Father					

		iv) Mother				
		v) Wife				
		vi) Sons				
		vii) Daught	ers			
(e	:)	Is he/she or his/l	ner business solvent?			
(f)	State full particulars of the documents verified:				
		(Remarks such	"as told by the party, agent etc." will not be accepted)			
7.			Whether the proposer is businessman and the Sum proposed is above one Crore then give the additional information as below			
	(a)	Location of the	Business Office/Shop/Factory			
	(b)	Reputation of the	ne proposer and his business			
	(c)	Source of Inco	me			
(d) Number of Employees						
	(e)	Turnover of the	business for last three years			
8.	(b) (c)	 Is there anything in the Life to be Assured's Occupation, financial or social position, Personal habits or any other circumstances which might add to the risk? Whether KYC/AML norms are fulfilled for the proposer? Are you satisfied that the life proposed and/or proposer is Not connected with any terrorists activities? Do you consider acceptance of the proposal is in order and recommend it as such? 				
9.	9. Are you a Politically Exposed Person (PEP) OR are you a family member or close relative of a Politically Exposed Person? [As per RBI guidelines, PEPs are individuals who are or have been entrusted with prominent public functions in a foreign country.]					
-			Mr / Mson(date) at(place).			
			oing statements are true and correct and are made as a result of my detailed n of documentary evidence.			
Place:			Signature:			
Date:			Name (Block Letters):			
			Designation:			
			Address:			

LIFE INSURANCE CORPORATION OF INDIA

	LIFE	INSURANCE	CORPC	MATION OF INDIA	_
Name:					Date:
Address:					
То					
The Branch Ma	nager				
LIC of India,	mager,				
LIC OI IIIdia,	Branch	Office			
	Branch	Office.			
Dear Sir,					
Dear Sir,	Re: Pron	osal for Rs	on t	he Life of Sri	
	rte. 11op	0541 101 145		ne Ene of Sil	
	With refe	erence to the abo	ve proposal	submitted by me I have to	inform you as follows with
regard		me, insurance par			
3.0	,	, <u>F</u>			
1. My PA No. f	or Income	Гах is:-			
2. My yearly in					
Before tax is as					
i) Salary	1		Rs		
ii) Dividends			Rs.		
iii) Directors Fe	ees		Rs.		
iv) Interest on I	Loans		Rs.		
v) Share of reta			Rs.		
vi) Net Income		erty	Rs.		
vii) Agricultura			Rs.		
viii) Any other	income (spe	ecify)	Rs.		
3. The total in	force insu	rance on my life			
•\	1 1		Total S	Sum Assured T	otal Yearly Premium
,	dividual				
,	UF MI				
,	MII artnership				
	an thership mployer-Ei	mnlovoo			
		mpioyee om private com	nanies		
VI) III	isur ance m	om private com	paines.		
4 I give below	information	about the incom	e total insu	rance in force, total premium	1
		family members.	ie, totai insu	rance in force, total premium	•
uniount per j	cui 101 111)				
		Yearly income	from	Total Insurance in force	Premium per year
		All sources (Be			T J J
i) Father					
ii) Mother					
iii) Wife					
iv) Children					
1)					
2)					
3)					
	sed on min	or life if all sibli	ngs are not	adequately insured reason	for the same.)
			C	2 0	
Mobile No. of t	the Propos	er/ Life to be ass	ured:		
E- Mail Id of the	he Propose	r/ Life to be assu	ured:		
Thanking you,					yours faithfully,
					(Name of Proposer)