

Mining and Quarrying Questionnaire

We thank you for applying for an HDFC Life Insurance Policy. To enable us to assess your application, kindly send this Mining and Quarrying Questionnaire answered by the Life to be Assured and duly signed by the Life to be Assured and Proposed Policy Holder, if any.

Application No. / Proposal No.						
Name of Life to be Assured.						
Do you participate in any kind of mining activities or likely to do so in future?		Ye	es / No			
Please answer all the following questions, only if the answer to above question is 'Yes' If the answer is 'No' then please return the form duly signed.						
2. Are you required to enter the mines as part of Your job?		Ye	s / No			
If yes, kindly mention duration of time spent and frequency.						
3. Mention percentage of your daily duti	ies:	Admin	istrative%			
		 Physic	cally inside the mines%			
4. Describe the exact nature of your dut	ies.	·	·			
5. Mention your occupational designation	on.					
6. Which type of mine do you work in? (Please tick on type of mine)			Underground Opencast			
		_	openious.			
7. Please tick the type of mining you wo	ork in.	0 0 0	Coal Potash, Rock-salt, Gypsum, Tin Quartz Iron ore Radioactive mineral ore Any other, specify			
8. Have you ever met with any accident account of your occupation?	on	Υe	es / No			
If yes, please mention the date of acceptant of injuries caused.	cident and					

9. Have you ever had any health a	ilment?	Yes / No	
If yes, please mention the exact condition.	diagnosed		
10. Have you ever had any respira	tory ailment?	Yes / No	
If yes, please mention the exac	ct diagnosed		
❖ An incor	nplete Questionn	aire will not be conside	red valid.
Declaration of Life to be Assured:			
I agree and understand that the informan integral part of the proposal made Limited and that failure to disclose any	by me for an in	surance policy from HDF	C Life Insurance Company
Signature/thumb impression (Life to be Assured)			Date: Place:
Signature/thumb impression (Proposed Policy Holder if different from Life to be Assured)			Date:Place:
In the case of thumb impression\ sig	nature in vernaci	ular language:	
In case of thumb impression of the whose identity can be edeclaration should be made by him.			
I hereby declare that I have explaine and have truthfully recorded the answ impression(s) above after fully understa	d the contents of ers provided to manding the content	this form to the Life to lee and that the Life to be sthereof.	be Assured inlanguage Assured has signed /affixed thum
Signature			Date:Place:
Name and address of the declarant			

HDFC Life Insurance Company Limited. CIN: L65110MH2000PLC128245. IRDAI Registration No. 101.

Regd. Off: 13th Floor, Lodha Excelus, Apollo Mills Compound, N.M. Joshi Marg, Mahalaxmi, Mumbai - 400 011.

For queries or more information, call us on 1860-267-9999 (Local charges apply). DO NOT prefix any country code e.g. +91 or 00. Available Mon-Sat from 10 am to 7 pm | Email - service@hdfclife.com | nriservice@hdfclife.com (For NRI customers only) | Visit - www.hdfclife.com