

FINANCIAL QUESTIONNAIRE

We thank you for applying for an HDFC Life Insurance Policy. To enable us to assess your application, kindly fill this Financial Questionnaire - for Personal Cover. It has to be completely answered by the Life to be Assured and duly signed by the Life to be Assured and Proposed Policy Holder, if any, and to be attested by the Authorised signatory.

Female applicants with income from partnership business, proprietorship firm, profit sharing, commissions, bonuses, agriculture can fill this questionnaire.

Please note: -

- ✓ Female applicants having income from Tuitions\ Beauty parlour\ Tailoring\ Boutique etc.to fill Self Employed Questionnaire.
- ✓ The Underwriters may call for Financial Questionnaire at their discretion.

Provide details for the below mentioned questions without leaving any question unanswered/ blank.

Application No. / Proposal No.		
Name of the Life to be Assured.		
Name of proposed Policy Holder if different from the Life to be Assured		
1.Please give a breakup of annual income details of Life to be Assured from all sources.		
a) Salary	Rs.	
b) Profession / Business	i) Number of Employee: ii) Income /Receipts: Rs..... iii) Business Turnover: Rs.....	
c) Share of profits in case of Partnership business	i) Number of Employee: ii) Income\Receipts: Rs..... iii) Business Turnover: Rs.....	
d) Income from House Property.	Rs.	
e) Agricultural income- Kindly also attach Agricultural Income Questionnaire.	Rs.	
f) Other sources (with full details)	Rs.	
g) Income from Commission (Kindly attach copies of commission receipts received in last six months to this questionnaire.)	Rs.	
h) PAN number	Number	
i) Do you pay wealth tax?	Yes / No	
2.Total family life insurance	Sum Assured	Premium
a) Parents	Rs.	
b) Spouse	Rs.	
c) Children	Rs.	
d) Total premium outlay in respect of existing life insurance held and proposed by Life to be Assured.	Rs.	
3. Bank name in which Account held.	a) Current /Savings: b) Demat:	
4. Amount of Current Assets-Estimated value of investments in -		
a) Property (Other than residential property)	Rs.	
b) Jewellery	Rs.	
c) Shares/Equities/ Mutual Funds	Rs.	
d) RBI bonds	Rs.	
e) Fixed Deposit	Rs.	
f) PPF /Postal	Rs.	
5. Amount of Current Liabilities.		
a) Secured Loan/s	Rs.	
b) Unsecured Loan/s	Rs.	
c) Total family income (excluding the income of the Life Assured)	Rs.	
d) HUF Income (Karta / Co-parceners)	Rs.	

6. If the object of insurance is loan cover, please fill up the following	
a) Name of lender	
b) Name of borrower	
c) Purpose of loan	
d) Amount of loan /term or tenure of loan	Rs.
e) Period of repayment of loan	

❖ **An incomplete Questionnaire will not be considered valid**

Declaration of Life to be Assured:

I agree and understand that the information given herein is true and complete in all respects and will form an integral part of the proposal made by me for an insurance policy from HDFC Life Insurance Company Limited and that failure to disclose any material fact known to me may invalidate the contract.

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\ signature in vernacular language:

In case of thumb impression of the Life to be Assured the same should be attested by a person of standing whose identity can be easily established, but unconnected with the Company and this declaration should be made by him.

I hereby declare that I have explained the contents of this form to the Life to be Assured in _____ language and have truthfully recorded the answers provided to me and that the Life to be Assured has signed /affixed thumb impression(s) above after fully understanding the contents thereof.

Signature

Date:.....
Place:.....

Name and address of the declarant _____

To be filled completed by the BDM/ASM/SM/SSM/ESM/CH/CM/CAM/BM/RM/SM/ARM/MCA/Sr.CAM/CSM

a) Please mention the date on which you met the Life to be Assured	
b) Are you satisfied about the identity of the Life to be Assured?	
c) Does the Life to be Assured have any physical deformity or impairment?	
d) Do you suspect anything adverse in the Life to be Assured's occupation, financial, personal habits or any other information, which might help to assess the risk?	

Please give at least two reasons to support your recommendation of this proposal form:

1) _____
2) _____

Declaration to be filled by level equal and above
BDM/ASM/SM/SSM/ESM/CH/CM/CAM/BM/RM/SM/ARM/MCA/Sr.CAM/CSM

I hereby declare that I have personally verified and enquired in detail all the information declared by the Life to be Assured, as above and the information is true and correct to the best of my knowledge and belief.

On the basis of the above, I recommend the consideration of current proposal.

Name in full:		Date:	
Designation:		Place:	
Signature		Employee No:	

NOTE: With reference to recent regulatory changes, please submit PAN or Form 60 (if you do not have a PAN) with HDFC Life with immediate effect.