

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.	

1. Do you participate in any kind of mining activities or likely to do so in future?	Yes / 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? If yes, kindly mention duration of time spent and frequency.	Yes / No
3. Mention percentage of your daily duties:	Administrative.....% Physically inside the mines.....%
4. Describe the exact nature of your duties.	
5. Mention your occupational designation.	
6. Which type of mine do you work in? <i>(Please tick on type of mine)</i>	<input type="checkbox"/> Underground <input type="checkbox"/> Opencast
7. Please tick the type of mining you work in.	<input type="checkbox"/> Coal <input type="checkbox"/> Potash, Rock-salt, Gypsum, Tin <input type="checkbox"/> Quartz <input type="checkbox"/> Iron ore <input type="checkbox"/> Radioactive mineral ore <input type="checkbox"/> Any other, specify.....
8. Have you ever met with any accident on account of your occupation? If yes, please mention the date of accident and extent of injuries caused.	Yes / No

<p>9. Have you ever had any health ailment?</p> <p>If yes, please mention the exact diagnosed condition.</p>	<p>Yes / No</p>
<p>10. Have you ever had any respiratory ailment?</p> <p>If yes, please mention the exact diagnosed condition.</p>	<p>Yes / No</p>

❖ **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 _____

HDFC Life Insurance Company Limited [Formerly HDFC Standard Life Insurance Company Limited] (HDFC Life).

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 |

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