

MAX LIFE INSURANCE CO. LTD

MERCHANT NAVY QUESTIONNAIRE

Proposal No: _____

Life to be Insured: _____

1. Which of the following types of vessel do you work on?

- Passenger vessel/Ferry _____
- Cargo vessel _____
- Barge, dredger, lighter, lighter, Lightship, or weather ship _____
- Cable and pipe-laying vessel, factory ship, oil rig barge
or supply Ship _____
- Others. _____

2. What percentage of your duties are of a manual or
physical in nature? _____

3. Have you had any accidents or illnesses associated with _____ Yes/ No
your duties? If "Yes", Please give details. _____

I hereby declare and agree that the above particulars and answers are complete and true, that I have not held back any relevant facts or details, and that the answers to questionnaire will form part of the application for the desired insurance on my life.

Signature of life to be insured

_____/_____/_____
Date

(If the life to be insured is under 18 years, signature of Policy Owner is required)