

Oil and natural gas

Supplementary questionnaire (to be completed by the life to be insured)

Instructions

Please complete this form in CAPITAL letters. All questions must be answered accurately with full disclosure of all relevant information.

If there is insufficient space for any answer please continue on a separate piece of paper and attach to this questionnaire.

Oil and natural gas divers should use the supplementary diving questionnaire.

1 Personal details

Full name of life to be insured

Title Mr Mrs Miss Ms	Dr Other (pl	ease give details)			
Family name					
Forename(s)					
Date of birth DDMMYY	Y	Proposal number			
2 Supplementary questions					
Where are you based? (please tick one only).					Offshore
Please describe exact geographical area where	you usually work (e.g. Br	tish sector of North Sea,	etc.).		
What mode of transport do you use to get to	and from the rig? (e.g. fli	ght, etc.).			
Mode of transport	Number each year	Duration of flight(s)			
How long is your normal length of stay on the rig	_ g?				
Please provide the name of your employer and	I its country of origin.				
What is your exact job title?					

What are your precise occupational duties? How long have you been engaged in your current occupation? Do your duties include any or all of the following: i. Underwater work? No Yes If 'Yes', please give details. No ii. Working at heights? Yes If 'Yes', please give details. iii. Working on the drilling area? Yes No If 'Yes', please give details. iv. Working with explosives? No If 'Yes', please give details. Thank you for completing this form. Please return it to us with your proposal, or if you prefer, in a sealed envelope. 3 Declaration I declare that the answers given, whether in my handwriting or not, are true and complete to the best of my knowledge and belief. I agree that this form will constitute part of my proposal and that failure to disclose any material fact known to me may constitute grounds for rejection of a claim or repudiation of the contract. If a material fact is not disclosed in this proposal, any policy issued may not be valid. If you are in doubt as to whether a fact is material, you are advised to disclose it. This includes any information that you may have provided to the agent but was not included in the proposal. Please check to ensure you are fully satisfied with the information declared in this proposal. Signature of life to be insured

Supplementary questions (continued)

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