



F3251(Spl)

Annexure 'A'

**Life Insurance Corporation of India**  
**DELHI DIVISIONAL OFFICE-III**  
**ADM (Sales) / Marketing Manager's Confidential Report**

**Branch Office : 12N, Dwarka, New Delhi**

**Proposal No : \_\_\_\_\_**

**Instruction:**

- This report is to be completed where the Sum Proposed is in excess of Rs.15 Lacs.
- Before completion of the report the reporting official should satisfy himself regarding the identity of the proposer . He should meet him/her preferably at his residence before completing the report. The reporting official should make independent enquiries about the life to be assured's health and habits, occupation, income, social background and financial position etc .
- This report must be completed immediately after the enquiries are made.

1. Full Name of the Proposer / Age (years)	
Full Name of the Life to be Assured / Age (years)	
Occupation : Exact nature of Duties / Business	
Sum Proposed	
Full Address	
2.Total previous insurance in force Sum Assured	
3. Total previous premium per year for previous policies	
4. (a) By whom were you introduced to the proposer /Life Proposed	
(b) Are you satisfied about the identity of the Life Proposed	
(c) Give marks of identification ,if any	
(d) Does the life proposed look older than the declared age	
(e)What is the educational qualification of the life to be assured	
(f) What is your assessment about the general state of health of the life to be assured	
(g) Has he any physical deformity or impairment	
(h) Does your enquiry indicate of his having suffered from illness or injury or undergone any operation or hospitalization or medical investigation in the past? If so, give details	
5. Are you satisfied that no previous policy has lapsed within last three years on the Life of the life proposed ,his family member?(The reporting officer is expected to examine the entire family insurance portfolio)	
6(a) What is life proposed yearly income from all sources ( before tax) ? (Give detailed, and accurate information about the nature of source)	
(i) Employment	
(ii) Business or Profession	
(iii) Agriculture	
(iv) Investment	
(v) Property	
(vi) Any other source	
<b>Gross Total</b>	

6(b) Give information about the income ,total insurance in force and total premium amounts per year for the family members of the proposer			
	Total yearly Income from All sources (before tax)	Total Insurance in force	Premium per year
i. Father			
ii. Mother			
iii. Wife			
iv. HUF			

(If it is noticed that any earlier policies belonging to any one including the proposer's are financed from any of the H.U.F. funds ,then give detailed information on the premium amounts so paid , which H.U.F. finances the policies ,on whose life the policies are so financed and what are the premium amounts)

6(c) Give information about the income ,total insurance in force and total premium Amounts per year for the children of the proposer

	Income from All sources (before tax)	Total Insurance in force	Premium per year
Sons			
Daughters			

6(d) Give the figures of Income Tax paid, Total assets (excluding Life Assurances) and Total liabilities of the Proposer, Life proposed & family members.

	Income Tax	Assets	Liabilities
Proposer			
Life Proposed			
Father			
Mother			
Wife			
Sons			
Daughters			

6(e). Is he or his business solvent ? \_\_\_\_\_

6(f). State full particulars of the documents verified (Remarks such as "as told by the Party, agent etc will not be accepted):  
\_\_\_\_\_

7 (a) Is there anything in the Life to be Assured's occupation, financial or social position, personal habits or any other circumstances which might add to the risk ?	
(b) Whether KYC / AML Norms are fulfilled?	
(c) Are you satisfied that the Life proposed and/ or proposer is not connected with any terrorist activities?	
(d) Do you consider acceptance of the proposal as in order and recommend it as such ?	

I hereby declare that the foregoing statements are true and correct and are made as a result of my detailed enquiries and on verification of documentary evidence .

Signature : .....

Name :

Designation :

Address :

Place : New Delhi

Dated : \_\_\_\_\_