

Life Insurance Corporation of India
Policy Extract from Previous / Proposal Papers

"
Br.Office / D.O. Policy / Proposal No.

"
Name & Sum Assured

"
Address : Plan & Term

"
Father : Date of Proposal.....

"
Occupation : Proposal No.....

"
Occupation: Date of Comm.of risk.....

"
Income : Date of Comm.of Pol.....

Age	Date of Birth	Other Assurance mentioned in the Proposal		
		Unit / DO	Pol/Prop.no	Sum assured
				year

Whether age admitted				
Proof of Age				
Medical Examiner				
Qualifications and limit				
"				
mentioned in the Proposal				

"
Date of Examination Date of special reports.....

"
Place of Examination Nature of special reports.....

Height	Pulse	Others Particulars, if adverse
Weight	B.P.Systolic	
Chest on inspiration	B.P.Diastolic	
Chest on Expiration	Urine:Sp.Gravity	
Abdomen	Sugar	if female mention category-palced:

(Cat I, II & III)

"

Albumen

"

Family History	If Living		If Dead		
	Age	State of Health	Cause of death	Year of death	Duration of Age at death

"

Father

"

"

Mother

"

"

Brothers

"

"

Sisters

"

"

Wife / Husband

"

"

Children	No.Living	No.Dead	Cause and year of death
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"

How proposal was dealt with

Terms of acceptance

"

Name of office which decided the case

"

"

"

Sr./Branch Manager.