

Female Life Declaration Form (Self employed/Unearned Income)

Proposal Number: _____ **Date of Birth** _____

Life to be Insured Name: _____

Marital Status: **Single** **Married** **Divorced** **Widow**

Educational Qualification: _____

Annual Income from all sources: Rs. _____

Are you an Income Tax Assessee? **Yes** **No** **(Documentary evidence -ITRs)**

Husband's Details (Inc case of married females only)

Annual Income: Rs. _____

Existing insurance cover in force: Rs. _____

Parent's Details (Inc case of unmarried / Divorced / Widow only)

Annual Income: Rs. _____

Existing insurance cover in force: Rs. _____

Sources of income along with details (tick as applicable):

Unearned Income:

Rental Income – [Documentary evidence-ITRs/ Rent/Lease Agreement /Rent Receipts(last 6 months), etc.]

Number of properties yielding rental income:	_____
Duration of lease: _____ years	Monthly Rental: Rs _____
Period of lease : From _____ (mm/dd/yy) to _____ (mm/dd/yy)	
Address of rented property: _____	

Investment and Interest Income – [Documentary evidence-ITRs / Investment Proof –eg. Copy of FDs ,Bonds, Portfolio statement etc.]

Amount invested in Bonds/ FD'S / Bank savings:Rs _____ Rate of interest (percent) _____

Period of investment: _____ years Annual Earning Rs _____

Earned Income:

Tuition Income – [Documentary evidence- ITRs, Bank statements held in own name for last 1 year, etc]

Number of students per month: _____ Number of subjects taught _____

Fees per head Rs _____ per month Fees per subject Rs _____ per month

Number of working hours per day : _____ Do you work from home? ?Yes ?No

Is this you regular source of income? **Yes** **No**

Income from other business (Beautician, Tailoring etc) : [Documentary evidence- ITRs/ Bank Statements(for 1 year in own name),etc.]

Exact nature of business: _____

Number of Clients per day: _____

Average Earnings per day Rs _____

Earnings per month : Rs. _____

Is this you regular source of income ? Yes No

Is it a registered business / Franchisee ? Yes No

Do you maintain books of accounts in respect of your business ? Yes No

Do you work from home? Yes No

Address of the business _____

Income from Agriculture: [Documentary evidence- ITRs /1 year Bank Statements (held in own name)/ Patwari Certificate/Form J/ agricultural land holding documents]

Type of Crop cultivated: _____

Yield / acre / annum in Re terms : Rs. _____

Area of Land cultivated _____

Is this you regular source of income ? Yes No

Enclosures: Please tick the documentary evidence enclosed-

- Income Tax Returns
- Rent/Lease Agreement /Rent Receipts(last 6 months)
- Investment Proof –eg. Copy of FDs ,Bonds, Portfolio statement
- Bank statements held in own name for last 1 year
- Patwari Certificate/Form J/ agricultural land holding documents
- If others, please specify _____
- Not available

I declare that the answers I have given are, to the best of my knowledge, true and that I have not withheld any material information that may influence the assessment or acceptance of this application.

I agree that this form will constitute part of my proposal (dated.....) for life insurance and that failure to disclose any material fact known to me may invalidate the contract.

**Signature of the life to be insured
Manager**

Signature of Advisor

Signature of Sales

Date