oposal Form No.			
FINANCIAL STATEMENT		AVIVA	
is report should be completed by the person to be insure	d	Life Insurance	
Ill Name of the proposer		Date of Birth dd mm yyyy	
How much life insurance cover is currently in force on t	the Life to be insured ?		
Please state the various sources of income Salary House Property	Business & Profession Others		
Personal financial information Income before taxes	Current Financial year-200	Previous Financial Year-200	
modific beloft taxes	(Rs)	(Rs)	
Income from salary and business		N 20	
Bonus/ Commission			
Dorrott Commission			
Other Income (Interest, house property, others)			

Assets	Amount (Rs)	Liabilities	Amount (Rs)
Cash/ Bank/ Deposits		Mortgage	
Investments: equities, bonds, etc.	Personal Loans		
NSC/PPF/UTI/others savings			
Real estate		Other liabilities	
Moveable property			
Others (please specify)			
Total		Total	

I declare that the answer 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 proposal.

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 between me and the Company.

Signature of the Proposer

(Assets-Liabilities)

Date

Signature of Witness

Name & Address of Witness