Set of possible signatures



Signature 1

Signature 2

Signature 3

Signature 4

Apart from the aforesaid Signatures, I do not sign in any other manner.

I agree that this form will constitute part of my proposal with Aviva Life Insurance Company and that failure to disclose any material fact known to me may invalidate the contract between the Company and me.

Date __I____

Date __I____

Signature 9

Signature of the Declarant (In case Life to be Insured signs in vernacular or is illiterate)