LIFE INSURANCE CORPORATION OF INDIA

Questionnaire to be completed by NRI

Divisional Office _____ Branch Code _____

Proposal No. _____ Policy No. _____

Sr. No.	Particulars		Answer
1.	Your Nationality		
2.	a.	Your country of permanent residence	
	b.	Date from which you became a permanent resident of the country mentioned in (a) above	
3.	a.	Date of leaving India for the first time	
	b.	Details of exchange facility availed of	
	c.	Full particulars of Reserve Bank Permit Number	
	d.	Visa status, if any	
	e.	Name of the Office of the Reserve Bank which granted the above facilities	
4.	Duration of your stay abroad		
5.	a.	Purpose of your stay abroad	
	b.	Are you gainfully employed abroad?	
	c.	Your monthly income from employment in the foreign country (including Scholarship, Assistantship etc. for students or trainees). Please enclose true copies of the appointment letter received from your employer or educational institute.	
6.	a.	Passport Number	
	b.	Date of issue	
	c.	Place of issue	
	d.	Date of birth	
7.	Whether you hold any Bank account in India and if so, whether it is a Resident Account or Non-Resident Account. Furnish full details thereof.		
8.	The source from which the premiums will be paid		

Sr. No.	Particulars		Answer
9.	**Please indicate by which of the following manner you propose to remit the premiums to LIC of India**		
	a.	By direct remittance from the country of your residence to India through Banking channels (preferably by Rupee Draft in favour of LIC) or by remittance through postal channels like foreign orders.	☐
	b.	By cheques drawn on your Non-Resident (External) or Foreign Currency (Non-Resident) Account with a Bank in India.	☐
	c.	By cheques drawn on your Resident / Non-Resident Account with a bank in India.	☐
	d.	By cheques drawn on an account maintained by a resident parent or spouse of the policyholder in their name or joint name with other close relatives.	☐
	e.	By any other manner (please specify)	☐
10.	Your full address in the country of your residence abroad		
11.	State full name and address of an Indian National permanently residing in India to whom the policy may be dispatched		
12.	Date of your leaving India / Date you left India (current visit)		
13.	If you are a student, state the nature and full details of your studies		

I hereby declare that the foregoing statements and answers are true in every respect and I am agreeable to treating this as a part of the original Proposal Form. I am also aware that claims of any nature arising under the policy will be settled in Indian currency in India only. I have taken note of the restrictions applicable as given in the enclosed annexure.

Dated at _____ this _____ day of _____ 20 _____

Witness

Name _____

Address _____

Designation _____

Signature _____

_____

Signature of the life to be assured