LIFE INSURANCE CORPORATION OF INDIA Manufacturing Industry (Occupation-013)

Proposal No:
Name of the Proposer

Full name of the Employer (please do not use abbreviations) Department in which you work Your designation or occupation Full details of the exact nature of your duties If you are supervisor, nature or work done ander your supervision Acids: Are you a lead burner working in vats or schambers? Explosive & Ammunition – Are you employed in salvage and reconditioning department employees persons andelling explosive? Are you employed in salvage and
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econditioning department?
Chemical engineer, Chemist, lab technician, Reasearch echnician, tester, Toxicologist, Job of supervision
Others
DECLARATION do hereby declare that the foregoing statement of here are true in every particular and agree and declare that these statements and this declaration my Proposal for Insurance and the Declaration relative thereto shall form the basis of the petween me and the Life Insurance Corporation of India and that if any untrue averment is therein the said contract shall be absolutely null and void and moneys which shall have been spect thereof shall stand forfeited to the Corporation. on the
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Signature of the Life to be assured