LIFE INSURANCE CORPORATION OF INDIA (Sewage Worker) (Occupation Code-019)

Proposal No: Name of the life to be assured:

1	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	
	The type of mine	
	If you are supervisor, nature or work done	
	under your supervision	
2	Are you a labourer, Cleaner, inspector of	
	underground duties?	
3	Are you Steeple Jack	

DECLARATION

statements and answers his declaration along whe basis of the contracturtrue averment be conwhich shall have been p	ith my Proposal f ct between me a tained therein the	or Insurance and the Life Insuesaid contracts	agree nd the uranc hall b	and dec Declara Ce Corpo De absolu	clare that ation relat ration of utely null	these ive the India and vo	state ereto and	shall form that if any
Dated at	_on the	day of		20				

Signature of the Life to be assured