ANNEXURE-II

QUESTIONNAIRE TO BE COMPLETED BY NON-RESIDENT INDIANS

Sr.		Particulars	
No.		Tarticulars	
1		Your Nationality	
2	а	Your country of permanent residence	
	b	Date from which you became a permanent resident	
		of country mentioned in (a) above	
3	а	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 Office of the Reserve Bank which granted	
		the above facilities.	
4		Duration of your stay abroad	
5	а	Purpose of your stay abroad	
	b	Are you gainfully employed abroad?	
	С	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	
		institutions.	
6	а	Passport Number	
	b	Date of issue	
	С	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	
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	
	h	orders. By cheques drawn on your Non-Resident	
	b	By cheques drawn on your Non-Resident (External) or Foreign Currency (N0n-Resident)	
		Account with Bank in India	
	С	By cheques drawn on your Resident/ Non-resident	
		account with bank in India	
	d	By cheque drawn on account maintained by	
	ਁ	resident parent or spouse of the policy holder in	
		their name or joint name with other close relatives	
	е	By any other manner (Please specify)	
10	Ť	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 study.	

I hereby declare that the foregoing statements and answers are true in every respect and I am
agreeable for 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 (Annexure-IV).

Dated at	this	day of	200
Dated at	u 110	aay oi	 200.

Witness: (signature) Name Address Designation

Signature of the Life to be Assured.