

## Oil & Natural Gas Industry Questionnaire – Confidential

To be completed in English by the life assured.

Full name

Date of birth (dd/mm/yyyy)

**Note: Oil and natural gas divers should also complete the separate diving questionnaire.**

1. Are you land based or offshore? Land based  Offshore

2. Please describe the exact geographical area where you usually work.

3. What mode of transport do you use to get to and from the rig?

4. How long is your normal length of stay on the rig?

5. Please provide the name and nationality of your employer.

6. What is your exact occupation and job title?

7. What are your precise occupational duties?

8. How long have you been engaged in your current occupation?

9. Do your duties involve:

a) underwater work?

b) working at heights?

c) working in the drilling area?

**Data Protection Act**

Any data you provide to RL360° may be shared, if allowed by law, with other companies both inside and outside of the RL360° Group and to persons who act on your behalf. Data and information about you can be transferred outside of the Isle of Man and RL360° may be required to provide it to its regulator, its government or anyone else required by law.

RL360° will use your data and information to allow for the administration of your policy, prevent crime, prosecute criminals and for market research and statistics. RL360° will, at all times, make sure that your data and information is only used in ways that are allowed by law.

The Isle of Man Data Protection Act 2002 allows you, after paying a small fee, to receive a copy of the data and information RL360° holds about you.

For further information please write to: Data Protection Officer, RL360°, RL360 House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

**Declaration**

I declare that the above answers are true to the best of my knowledge and that I have not withheld any information that may influence the assessment or acceptance of this application.

I agree that any supplementary questionnaire will form part of my application to the company and that non-disclosure of any material fact known to me may invalidate the contract.

Signature of life assured

Date (dd/mm/yyyy)