

PERSONAL FINANCIAL QUESTIONNAIRE

CONFIDENTIAL

To be	completed in English by the lif	e assured.				
Full na	ame of life assured					
Date o	of birth (dd/mm/yyyy)					
Occup	pation					
	ncy of information provided form (in words)					
1.	Please state your annual income for each of the last three years.					
	Source	This year	Last year	Previous year		
	From own trade					
	From investments					
	From other sources					
2.	Are any concurrent application Yes No If Ye		ny, sum insured and reason belo	w.		
3.	Please detail any existing cover you may have:					
	Source	Date commenced	Sum insured	Reason for cover		
	Life Assurance					
	Permanent Health Insurance					
	Critical Illness Cover					
	Other (please specify)					



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Please give details of dep	endants (number, age a	and relationship).		
Have you ever been decla	red bankrupt?			
Yes No	If Yes, please give de	tails and dates below.		
Why is the cover required]?			
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Please give details of per		life assurance).		
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Please give details of per Fixed Property nvestments Other assets		life assurance).		
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Please give details of per Fixed Property nvestments Other assets		life assurance).		
Please give details of per Fixed Property nvestments Other assets Fotal assets Fotal liabilities		life assurance).		
Please give details of perseixed Property nvestments Other assets Total assets Total liabilities Total estimated net worth	sonal assets (excluding			

DATA PROTECTION

This form collects your personal data. We require your personal data so we can provide you with services relating to the performance of your contract. You may ask us to stop processing your data, however this may disrupt the services RL360 can provide to you or may stop us being able to assist you. To find out how long we will keep your data, please refer to our privacy policy at www.rl360.com/privacy. Any data you provide to RL360 may be shared, if allowed by law, with other companies both inside and outside of RL360 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.

You can receive a copy of the information RL360 holds about you free of charge by writing to our Data Protection Officer at: RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles, or by emailing dpo@rl360.com. We can reserve the right to not send you your personal data in some circumstances. If we do we will write to you setting out the reasons why.

Our full privacy statement can be viewed at www.rl360.com/privacy or can be obtained by requesting a copy from our Data Protection Officer.

DECLARATION

Signature of life assured

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 give my express consent for the information in this form to be processed.

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.

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Date (dd/mm/yyyy)								
Where it has been requested that this form be witnessed by a third party (e.g. solicitor, bank manager, accountant), they must do so below. Please include the name of company and the company stamp.								
Signature of third party								
Date (dd/mm/yyyy)								
Name of third party								
Occupation								
Qualifications								
Address								
Telephone number								
Email address								

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