

PERSONAL FINANCIAL QUESTIONNAIRE

CONFIDENTIAL

To be completed in English by the life assured.

Full name of life assured

Date of birth (dd/mm/yyyy)

Occupation

Currency of information provided on this 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 applications being made to other offices?

Yes No If Yes, please state name of company, sum insured and reason below.

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)			

4. Please detail your liabilities (e.g. mortgage and loans).

5. Please give details of dependants (number, age and relationship).

6. Have you ever been declared bankrupt?

Yes No If Yes, please give details and dates below.

7. Why is the cover required?

8. Please give details of personal assets (excluding life assurance).

Fixed Property	<input type="text"/>
Investments	<input type="text"/>
Other assets	<input type="text"/>
Total assets	<input type="text"/>
Total liabilities	<input type="text"/>
Total estimated net worth	<input type="text"/>
Estimated IHT Liability	<input type="text"/>

9. Please give details of any gifts being made or made within the last three years.

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

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.

Signature of life assured

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