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ROYAL INSURANCE CORPORATION OF BHUTAN LTD.

Declaration of Good Health
 (Personal Statement regarding Health)

All answers to be filled in legibly. Answers must be given in words (Strokes of pen or dots or dashes will not be accepted as replies.)

1. Proposal Details

Policy No.		Sum Assured	
Name			
Address			

Kindly choose any of the following options (you can choose only one)

Option I (kindly tick in the box)

- i. Discount of 10 % for upfront payment of delayed premiums;
- ii. Medical report waiver till 31st December, 2021; and
- iii. Should obtain RICB's Declaration of Good health form.

Option II (kindly tick in the box)

- i. Upfront payment of 50 % of delayed premium and remaining premium in installments within six months.
- ii. 10% discount will not be applicable under this option.
- iii. Medical report waiver till 31st December, 2021; and
- iv. Should obtain RICB's Declaration of Good health form.

Medical questionnaires

Since the date of your last medical examination for the above-mentioned policy

a. Have you suffered from any physical or mental illness, injury or disability? If so, give details.

b. Have you been required to take medical treatment? If so, give details (such as duration of illness, effect of treatment) etc.

c. Has there been any change in your mode of life, habits and occupation? If so, give details.

d. Has any proposal on your life or an applicant for revival of a policy on your life made to this Corporation of any insurer ever been withdrawn/ dropped/ deferred/ declined, accepted with an extra premium or lien or on term otherwise than those proposed? If so, give details.

e. Do you have any policy/ies issued or revived on the non-medical basis with any office of the Corporation? If so, please give the number of policy/ies and/or proposal/s and the sum/s and/or proposed there under.



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f. Are you in sound health?	Yes	No			
3. ADDITIONAL QUESTIONS TO BE ANSWERED BY FEMALE POLICY HOLDERS					
a. Are you pregnant?	Yes	No			
4. Have you paid any deposit? If so, give details					
Receipt #		Date		Amount	

I hereby declare that the foregoing statements and answers are true in every particular. This declaration along with my proposal for insurance for myself (Includes Life Assured/Joint Policyholder) shall be the basis of revival of the lapsed policy between me and Royal Insurance Corporation of Bhutan Limited. I also declare that the health of my Life Assured/Joint Policyholder is in good condition. I agree that if any untrue averment be contained therein the said contract shall be absolutely null and void and all moneys which shall have been paid in respect thereof shall stand forfeited to the Corporation.

Place		Date	
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Signature of Witness		Signature of Proposer	
Name		Name	
Address		Address	
CID #		CID #	
Mob #		Mob #	

I acknowledge that the following conditions are understood during revival of my policy/ies:

1. The scheme is only applicable for the policies which have been lapsed for more than six months as of 30th June, 2021 since the last date of payment;
2. Customers availing above options are allowed to cancel their life insurance policies only after two years of renewal;
3. Life insurance benefit shall be eligible only after three months of renewal except under accidental demise and falling under claim concession period.

If in this form the answers to the questions and/or signature of the proposer are/is in vernacular then he should declare in his own handwriting above his signature(s) that all questions were explained to him and that his responses to the questions were given after fully and properly understanding the same.



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1) If the person filling in the form is other than the proposer, such person should make this declaration.

I hereby declare that I have fully explained the above questions to the Proposer and I have truthfully recorded the answers given by the Proposer:

Name and address of the declarant	
Signature	

2) In case the Proposer is illiterate

The thumb impression of the proposer should be attested by person of a social standing whose identity can easily be established, but unconnected with the Corporation and the same person must execute the following declaration;

I hereby, declare that I have explained the contents of the proposal form to the Proposer in (Language)..... and that I have read out to the Proposer the answers to the questions dictated by the Proposer, and that the Proposer has affixed this thumb impression to the proposal form after fully understanding the contents and consequence thereof.

Name and address of the declarant	
Signature	