

COMMERCIAL DIVING.

IMPORTANT INFORMATION

Please remember that if you do not answer the following questions truthfully and accurately it will very likely mean that a claim will be declined and the policy cancelled. If you are not sure whether any information is relevant, please disclose it anyway.

Where examples are shown, they are not intended to be a complete list.

Applicant Name

Title

Initials

Surname

Date of Birth

D

D

M

M

Y

Y

Y

Y

Application Number/Reference

1 Who is your current employer?

2 Where did you learn to dive?

3 How long have you been diving?

Years

Months

4 Where do you dive? Please state which countries and whether deep sea, coastal waters, lakes or rivers.

5 What is the maximum depth to which you dive?

6 Do you participate in:

	Yes	No		Yes	No
a) Construction/maintenance (coastal waters and docks)	<input type="checkbox"/>	<input type="checkbox"/>	j) Survey work	<input type="checkbox"/>	<input type="checkbox"/>
b) Dredging/salvage (coastal waters and docks)	<input type="checkbox"/>	<input type="checkbox"/>	k) Miniature submarines (no outside activity)	<input type="checkbox"/>	<input type="checkbox"/>
c) Caves/mines/ pot holes/ rescue work	<input type="checkbox"/>	<input type="checkbox"/>	l) Diving Bells/other submarines (no outside activity)	<input type="checkbox"/>	<input type="checkbox"/>
d) Pits/quarries	<input type="checkbox"/>	<input type="checkbox"/>	m) Use of explosives	<input type="checkbox"/>	<input type="checkbox"/>
e) Instructing	<input type="checkbox"/>	<input type="checkbox"/>	n) Exploration of seabed	<input type="checkbox"/>	<input type="checkbox"/>
f) Cable laying	<input type="checkbox"/>	<input type="checkbox"/>	o) Experimental diving equipment	<input type="checkbox"/>	<input type="checkbox"/>
g) Rig maintenance	<input type="checkbox"/>	<input type="checkbox"/>	p) Underwater photography	<input type="checkbox"/>	<input type="checkbox"/>
h) Pipe laying	<input type="checkbox"/>	<input type="checkbox"/>	q) Diving under ice fields	<input type="checkbox"/>	<input type="checkbox"/>
i) Salvage (deep sea)	<input type="checkbox"/>	<input type="checkbox"/>			

7 Please give full details if you have answered 'Yes' to any part of Question 6, including frequency of these details.

8 If you have any further information not covered by the previous questions please provide it here.

DECLARATION

I declare that the answers I have given are to the best of my knowledge and belief, true and complete.

Please remember that all items of information requested in this questionnaire are material facts which are taken into account when assessing acceptance of the application and in calculating the premium. If you do not give any of this information or if you mis-state any information it will very likely mean that a claim will be declined and the policy or policies cancelled.

I agree that this questionnaire will form part of my application for life, critical illness, income protection or mortgage protection insurance and I also agree to inform Legal & General of any change to this information between the date of this questionnaire and the issue of the policy contract.

Applicant's Signature:

Date:

D	D	M	M	Y	Y	Y	Y
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Legal & General Assurance Society Limited

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