

# Lives/Additional lives insured

## Application form

### Financial professional use only

 Agency number

 Bank/broker name

 External reference number

### Your application

Please read the product literature carefully before completing this application.

Please complete this form if you wish to insure lives in addition to, or instead of, the policy owner(s). You can insure a maximum of two lives including the policy owner(s) for Futura/Lifelong, International Term Assurance (ITA), International Decreasing Term Assurance (IDTA), SavingsPlus, Vista/InvestPlus and Wealth Accumulation Plan to do this please complete section 1 and 3 only. The question relating to smoking or use of tobacco or nicotine products is only relevant for lives to be insured who are applying for benefits (e.g. life cover, critical illness, waiver of premium, etc).

### Completing this form

Please write clearly in **BLOCK CAPITAL** letters and complete the form in English.

## 1 Policy details

Name of policy owner 1

Name of policy owner 2

### Life/Lives to be insured

#### Life to be insured 1

**Title**  Mr  Mrs  Miss  Ms  Dr

Other (please give details)

Family name

Forename(s)

Please give details of any previous names or alias used, including maiden name (if applicable)

**Date of birth**

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**Gender**

Male  Female

**Nationality**

**Occupation**

**Job title**

#### Life to be insured 2

**Title**  Mr  Mrs  Miss  Ms  Dr

Other (please give details)

Family name

Forename(s)

Please give details of any previous names or alias used, including maiden name (if applicable)

**Date of birth**

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**Gender**

Male  Female

**Nationality**

**Occupation**

**Job title**

## Life/Lives to be insured (continued)

### Life to be insured 1

#### Marital status

Single  Married  Other (please give details)

#### Contact details

Current residential address

#### Is the above address permanent or temporary?

Permanent  Temporary

If temporary, please specify the reason for this.

Rented accommodation  Company accommodation  
 Other (please give details below)

**Correspondence address** (if different from residential address)  
Please include PO Box number, city and country

Please provide a reason why you are using a correspondence address that is different from your residential address.

Using postal service  Other (please give details below)

#### Telephone number

#### Mobile number

#### Email address

If your application includes any benefits (e.g. life cover, critical illness, waiver of premium etc), have you smoked or used any form of tobacco or nicotine product in the past 12 months (e.g. cigarettes, cigars, pipe or chewing tobacco or nicotine products such as patches, gum or ecigarettes)?

Yes  No

#### Relationship to policy owner

Spouse  Other (please give details below)

### Life to be insured 2

#### Marital status

Single  Married  Other (please give details)

#### Contact details

Current residential address

#### Is the above address permanent or temporary?

Permanent  Temporary

If temporary, please specify the reason for this.

Rented accommodation  Company accommodation  
 Other (please give details below)

**Correspondence address** (if different from residential address)  
Please include PO Box number, city and country

Please provide a reason why you are using a correspondence address that is different from your residential address.

Using postal service  Other (please give details below)

#### Telephone number

#### Mobile number

#### Email address

If your application includes any benefits (e.g. life cover, critical illness, waiver of premium etc), have you smoked or used any form of tobacco or nicotine product in the past 12 months (e.g. cigarettes, cigars, pipe or chewing tobacco or nicotine products such as patches, gum or ecigarettes)?

Yes  No

#### Relationship to policy owner

Spouse  Other (please give details below)

## 2 Privacy notice

The personal information requested in this form is collected and used by Zurich International Life Limited (the Company) as Data Controller in line with the Data Protection Policy. Full details can be found online at <https://www.zurichinternational.com/en/zurich-international-life/about-us/privacy> or contact us for a copy.

## 3 Declaration

I/We understand that this form will constitute part of my/our proposal and that failure to disclose any material fact known to me/us may constitute grounds for rejection of a claim or repudiation of the contract.

I/We declare that the answers given, whether in my/our handwriting or not, are true and complete to the best of my/our knowledge and belief.

I/We confirm that this/these signature(s) is/are mine/ours or that/those of my/our appointed legal representative(s).

Signature of policy owner/Authorised signatory 1
--

Print name

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of life insured 1
-----------------------------

Print name

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of policy owner/Authorised signatory 2
--

Print name

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of life insured 2
-----------------------------

Print name

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Zurich International Life Limited is registered in Bahrain under Commercial Registration No. 17444 and is licensed as an Overseas Insurance Firm – Life Insurance by the Central Bank of Bahrain.

Zurich International Life Limited is authorised by the Qatar Financial Centre Regulatory Authority.

Zurich International Life Limited is registered (Registration No. 63) under UAE Federal Law Number 6 of 2007, and its activities in the UAE are governed by such law.

Zurich International Life Limited provides life assurance, investment and protection products and is authorised by the Isle of Man Financial Services Authority.

Registered in the Isle of Man number 20126C.

Registered office: Zurich House, Isle of Man Business Park, Douglas, Isle of Man, IM2 2QZ British Isles. Telephone +44 1624 662266 Telefax +44 1624 662038 [www.zurichinternational.com](http://www.zurichinternational.com)