

Date:

To  
The Manager,  
National Finance Limited

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**Subject: Declaration of Good Health for Life Insurance Coverage with my Deposit Scheme**

Dear Sir/Madam,

I am an Accountholder of \_\_\_\_\_ **Scheme** of National Finance Limited ref A/C no..... I would like to sign up for the Depositor’s Life Insurance Coverage provided by Chartered Life Insurance Company Limited.

I hereby declared that I am a Bangladeshi national and aged between 18 and 65 years. I understand that the maximum Insurance Benefit will be BDT. (Taka \_\_\_\_\_ ac) only in case of Death or Permanent Total Disability.

I also hereby declare that, currently I am in Good Health and actively performing my jobs without any disability. I am currently not receiving any treatment, have not treated or told to have any treatment for Cancer, HIV/AIDs, Kidney, Cirrhosis, Stroke, Heart disease, Liver or Lung Disorder and I do not have any physical impairment.

Based on the conditions for Exclusion such as Pre-Existing illness/Disability, Suicides, HIV/AIDs related diseases; I strongly believe that I am eligible for this Life Insurance Coverage.

I also hereby certify that according to my knowledge and belief, all the above statements are true and that I have not withheld any relevant information. I agree that this declaration will be the basis of this insurance.

I understand and agree that failure to disclose facts that affect the assessment of risk by the Insurance Company would invalidate the coverage.

I hereby authorize any hospital, clinic, medical provider, doctor, insurance company or any other company, institution or any other person who has any record or information about me to provide the insurer with the complete information, including copies of their records with reference to any sickness or accident any treatment, examination, advice or hospitalization. Any photocopy of this authorization shall be treated as original. I hereby understand and agree that my Insurance Coverage shall be, at all time, subject to the terms and conditions of the Master Policy issued by Chartered Life Insurance Company Limited to National Finance Limited.

Yours Sincerely  
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Signature

Name:

A/C number: