

ALCOHOL QUESTIONNAIRE

(Questions to be filled by life to be assured)

Full name of life to be assured

Proposal number /Application number

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1. Do you consume Alcohol in any of the following forms?

- **Wine** Yes No
If yes, ___ ml / day since ___ Yrs
- **Beer** Yes No
If yes, ___ bottles /day since ___ Yrs
- **Whisky / Gin / Rum / Vodka** Yes No
(Please tick whichever is applicable)
If yes, ___ pegs / day since ___ Yrs
- **Any other: (Please specify quantity/day)** Yes No
_____ since ___ Yrs _____

2. Details of past and present levels of consumption. [1 Unit is equal to half a pint of beer (300 ml), one glass of wine (125 ml), one measure of spirit (30 ml)]

Past: No of Units/day: _____ No of Years : _____
Present: No of Units/day: _____ No of Years : _____

3. Have you ever undergone any investigations, particularly any liver Function test (SGOT, SGPT, S. proteins (Albumin & Globulin), alcohol marker tests or any other blood tests? Yes No
If yes, Please provide the photocopies of the same.

4. Have you ever been hospitalized for alcohol related disease/driving offence Or any complications related to alcohol? Yes No
If yes, please provide the details.

5. Have you made any attempt to give up the habit? Yes No
If Yes, with what results?

6. Have you have given up completely? Yes No
If Yes, since when?

7. Have you lost weight in recent past without any changes in dietary or exercise patterns? Yes No

Please note that no. of units per day should be mentioned in terms of ml/day or pegs/day or bottles per day. [1 Unit is equal to half a pint of beer (300 ml), one glass of wine (125 ml), one measure of spirit (30 ml)]

I declare that the answers I have given are, to the best of my knowledge, true and that I have not withheld any material information that may influence the assessment or acceptance of this application.

I hereby agree that the forgoing questions and answers shall form part of the proposal for insurance made by me to the Company.

Place: _____

Date: _____

Signature of the Life to be Assured / Proposer