## **Underwriting Questionnaire**

## **Hazardous Occupations**



Producer Name		Phone		Date			
Client Name		Date of Birth					
☐ Male ☐ Female Face Amount		Max Premium \$		n \$	/yr.		
☐ Term ☐ Permanent	Has the client ever u	ised any form o	f tobacco (cigarette:	s, cigars, pipe, snuf	f, etc.)? 🗆 Yes	□No	
Frequency [		Date of last use		Type			
Law enforcement ☐Armed car guard ☐Penal guard	□Bank guard □Border patrol	☐Municipal police ☐Fishery officer		□Motorcycle p	oolice		
Federal agencies ☐FBI ☐Federal Air Marshall	□DEA □Secret Service	<u>—</u>		□SWAT □Bomb dispos	sal crew		
Fisherman ☐Type of fishing	□Crab	□Lobster	□Crocodile	□Other			
Length of stay		Тур	oe of water				
Type of vessel		Siz	ze of vessel				
Other	Job Title	Description/Duties					
☐Building/Construction							
☐Mining/Quarrying							
☐Mountain blasting							
☐Oil/Natural gas							
□On-shore exploration drilling/production	1						
□ Off-shore drilling/production							
☐Metal industry							
☐Lumber industry							
□Other							



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