

Form Occ 02 - Supplementary Questionnaire HM Armed Forces

Full Name: _____ **Date of Birth:** _____

Please remember that failure to answer the relevant questions fully may affect the underwriting decision and therefore terms offered may be amended or withdrawn.

1. Please describe your duties in full and whether or not you use explosives.

If your duties involve Aviation, Parachuting or Diving, please also complete the relevant Supplementary Questionnaires:

- **Aviation Form Pst 01,**
- **Parachuting Form Pst 06,**
- **Diving Form Pst 02 .**

2. Is your unit under orders or on stand-by to proceed to any disturbed area?

Yes No If **yes**, please give details:

3. Have you personally received warning orders or been alerted to proceed to, or are you on standby to proceed to any area of potential conflict?

Yes No If **yes**, please give details:

This includes the area formerly known as Yugoslavia, also Abu Dhabi, Afghanistan, Bahrain, India, Iraq, Iran Israel, Jordan, Kazakhstan, Kuwait, Nepal, Oman, Pakistan, Qatar, Saudia Arabia, Syria, Tajihistan, Turkmenistan, Turkey, United Arab Emirates, Uzbekistan, Yemen or surrounding seas.

4. Are you currently serving in a unit which is a member of the Rapid Reaction Force (RRF) or are you being posted to the RRF?

Yes No If **yes**, please give details:

Note:

Please ensure your answers given in this questionnaire are, to the best of your knowledge, true and complete and that no information is withheld which may influence the underwriting of the application(s) for Life Assurance, Critical Illness cover, Income or Mortgage Payment Protection. Failure to disclose any material facts known may affect the terms offered. If you fail to provide any of this information or if you mis-state any information this could mean that the terms offered may be amended or withdrawn. If you are uncertain as to the relevance of any such information please disclose it anyway.