



**For Commercial Divers add:**

1. Please state name of employer \_\_\_\_\_
2. Give a brief description of your occupational duties, giving details of activities such as exploration, salvage, harbor installations, inshore clearance, offshore oil rigs, fish farming, shell fishing.  
\_\_\_\_\_  
\_\_\_\_\_
3. Do you ever dive with explosives?  
■  No  
■  Yes
4. Do you expect your duties to change in the future?  
■  No  
■  Yes - please provide details \_\_\_\_\_
5. Have you ever been unable to dive?  
■  No  
■  Yes - please provide details \_\_\_\_\_
6. Date of last dive medical \_\_\_\_\_

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

Date: ||||||||

Place: \_\_\_\_\_

\_\_\_\_\_  
Signature of Life to be assured / Proposer: