

# Armed forces questionnaire

## Your details

Name

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Application number(s)

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## Why we are asking you for this information

You told us that you are in the armed forces. We'd like some more information on this so that we can assess whether to offer you cover and the terms of that cover.

## What you need to know before completing the questionnaire

You must take reasonable care to answer the questions fully, honestly, and accurately, to the best of your knowledge.

If you don't answer the questions correctly your policy may be cancelled, or its terms may be changed, or your claim may be rejected or not fully paid.

## Please answer the following questions

### General information

1. Please state your branch of service (tick your answer):

- |                                       |  |   |  |
|---------------------------------------|--|---|--|
| <input type="checkbox"/> British Army | <input type="checkbox"/> Royal Air Force       | <input type="checkbox"/> Royal Navy           | <input type="checkbox"/> Royal Fleet Auxiliary     |
| <input type="checkbox"/> Royal Marine | <input type="checkbox"/> Army Reserve          | <input type="checkbox"/> Army Regular Reserve | <input type="checkbox"/> Royal Naval Reserve       |
| <input type="checkbox"/> RAF Regiment | <input type="checkbox"/> RAF Volunteer Reserve | <input type="checkbox"/> Royal Marine Reserve | <input type="checkbox"/> Royal Auxiliary Air Force |

2. Please state your battalion, regiment, squadron, ship or establishment:

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3. Please state your rank:

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4. Please give a brief description of duties:

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## Deployment history

5. Please state your readiness category:

☐ R0☐ R4☐ R8☐ Other☐ R1☐ R5☐ R9☐ R2☐ R6☐ R10☐ R3☐ R7☐ R11

If 'other', please state here:

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6. Are you currently deployed, or have you received a Notice for Deployment or Call out Notice?

☐ Yes☐ No

If 'yes', please state the name of the country:

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7. Have you served overseas in the last five years?

☐ Yes☐ No

If 'yes', please state the name of the country or countries:

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8. Are you non deployable?

☐ Yes☐ No

If 'yes', please give the reason why. We may require evidence to support this:

☐ Medical category☐ Nature of contract☐ Nature of duties☐ Other

If 'other', please describe below:

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## Special Forces

9. Are you a member of or on attachment to the Special Forces?

☐ Yes☐ No

10. Are you a member of the Special Forces Support Group?

☐ Yes☐ No

## Explosive ordnance disposal and mine clearance

11. Do your duties include explosive ordnance disposal or mine clearance?

☐ Yes☐ No

## Aircrew

12. Are you a pilot or aircrew?

☐ Yes☐ No

If 'yes', please state the aircraft in which you fly:

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## Reason for cover

13. Please give the reason for this cover:

☐ Mortgage protection☐ Family/personal protection☐ Other

If 'other', please describe below:

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14. If mortgage protection, please provide:

a) the date the mortgage was applied for 

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b) the mortgage amount 

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c) the period of the mortgage 

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d) the name of the lender 

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e) the mortgage roll/account number 

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# Reserve status

If you are a member of the Volunteer or Regular Reserve Forces, please also answer the following questions:

15. If applicable, please state the date you left regular service: 

Date 

M

M

Y

Y
16. Have you been deployed as a reservist? 

Yes  No
17. If 'yes', when were you last deployed as a reservist? 

Date 

M

M

Y

Y

# Declaration

I declare that:

- I have completed the information on this form fully, honestly, and accurately, to the best of my knowledge.
- I am aware that if I haven't answered the questions correctly my policy may be cancelled, or its terms may be changed, or a claim may be rejected or not fully paid. Cancelling a policy means that no cover or other benefits will be provided.
- I have read the Zurich data protection leaflet 'Your privacy is important to us' and I agree to the personal information I have provided in this form being used in the ways described.

Signature

Date 

D

D

M

M

Y

Y

Y

Y

