



# I.M.E. Life Insurance Co. Ltd.

Registered & Corporate Office: Hathway Complex, Lainchaur, Kathmandu, Nepal  
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F.N. 005

..... **Branch Office**

## Moral Hazard Report

1. Proposal No. .... Sum Assured: Rs. ....
2. Name of Proposer: .....
3. Name of Life to be Assured: .....
- (If Different from the Proposer)
4. Are you related to Proposer: **Yes/No**  
(If yes, please disclose relationship) .....
5. Apparent age of the Life to be Assured: .....
6. Are you satisfied about his/her identity: .....
7. Height (As physically appeared): **Under Weight/Medium/Over Weight**
8. What is his/her built: **Yes/No**
9. Does he/she look healthy:
10. Place of Meet:
11. Date of Meet:
12. Time of Meet:
13. What is his/her Profession (with details) .....
- .....
14. i) What is the income stated by him/her: .....
- ii) Are you satisfied about it? **Yes/No**
15. Your comments on the matters, which you consider material for considering his/her proposal :  
.....  
.....
16. Do you recommend acceptance of the proposal for the S.A. mentioned above? **Yes/No**

Place : .....  
Date : .....

Signature : .....  
Name : .....  
Designation : .....