

Work and pastimes questionnaire

Name of customer to be covered

Reference no

Please read each question carefully before answering and use capital letters throughout.

Important – Telling Irish Life about relevant information.

Please remember that you are obliged to answer the questions asked in this form, honestly and with reasonable care.

- If your answers are not true and complete, we may be entitled to void the policy without return of premiums, refuse a claim, treat the policy as if it have been entered into on different terms or reduce your claim amount on foot of the contract of insurance.



Pastimes details

1 Boxing

Are you an amateur or professional?

Do you currently hold a license to box? Yes No

If Yes, please state whether you have ever had your license revoked or suspended

If an amateur, do you intend to turn professional at some stage in the future? Yes No

Please state:

- (a) level of competition engaged in
- (b) length of bouts
- (c) total number of bouts to date
- (d) number of bouts in the past year
- (e) estimated number of bouts in the coming year

2 Equestrian events

Please show below the number of occasions you undertook each activity over the last three years under each activity heading. If none, please state none.

Activity	Year 20	Year 20	Year 20
Hacking			
Showing/dressage			
Gymkhanas			
Driving events			
Riding club			
Schooling			
Flat racing			
Hurdle racing			

Activity	Year 20	Year 20	Year 20
Breaking			
Show jumping			
Hunting			
Hunter trials			
3 day events			
Point to point			
Hunter chasing			
Steeplechasing			

Other riding activities not listed please give details

Do you engage in these activities solely as a leisure pursuit? Yes No

If No, please describe your occupational involvement

3 Hang gliding

Are you a member of a hang gliding club? Yes No

If Yes, please give details

How many hours experience of hang gliding do you have?

Give details of:

(a) geographical limits

(b) number of flights per annum

(c) average duration of flights

Do you fly hang gliders which are

(a) powered Yes No

(b) launched or kept in flight by being towed by car, boat, etc? Yes No

Do you engage in any of the following:

(a) displays, competitions or exhibitions? Yes No

(b) record attempts, stunts or other unusual activities Yes No

If Yes, please give details

4 Motor sports

What type of competition license do you hold?

Do you compete as an amateur or professional?

Are you sponsored? Yes No

If Yes, please give details

Please state the type of vehicle including class or formula of car or motorcycle (RAC/FIA/ACU)

What is its engine capacity?

What type of events do you participate in?

Where are the events held?

Names of competitions entered

Number of races

(a) to date

(b) last 12 months

(c) in next 12 months

(d) won in last 12 months

If motor cycle racing, do you race in the Isle of Man? Yes No

Do you anticipate changing the type of event you participate in? Yes No

If Yes, please give details

5 Mountaineering

In which areas do you climb?

To what standard do you climb?

(e.g. moderate, severe, hard, very severe, etc)

How many years have you been climbing regularly?

How often to you climb and in what season of the year?

Are you a member of a club? Yes No

If Yes, please give details

Do you have any intention of climbing outside the ROI or UK in the future? Yes No

If Yes, please give details

Have you been a member of any special expeditions? Yes No

Do you plan to join any in the future? Yes No

If Yes, please give details

6 Parachuting

How long have you been parachuting? (number of years)

total number of jumps

Are you a member of a parachuting club? Yes No

If Yes, please give details

Give details of:

(a) number of jumps per annum

(b) location and height of jumps

Do you engage in any of the following:

(a) displays, or competitions? Yes No

(b) record attempts or stunts Yes No

(c) free fall jumping? Yes No

If Yes, please give details, including number per annum

7 Pot-holing and caving

Are you a member of a pot-holing or caving club? Yes No

If Yes, please give details

How often do you participate?

Where do you participate and where do you intend to participate in the future?

Up to what depth/standard do you participate?

Are you always accompanied? Yes No

Do you participate in any record attempts or new cave exploration? Yes No

If Yes, please give details

8 Powerboat racing

What make and model of craft do you race?

What is its engine capacity?

In what type of event do you compete? (state class)

Do you compete:

(a) on inland waters? Yes No

(b) in off-shore races? Yes No

If Yes, please give details

Do you compete in local, national or international events?

How many events:

(a) do you expect to enter in the next 12 months?

(b) have you entered in the last 12 months?

(c) have you won in the last 12 months?

9 Sailing

Do you sail solely as a leisure pursuit Yes No

If No, please describe your occupational involvement

Type and size of craft

Number of crew

Leisure only:

(a) how often do you go sailing per annum

(b) where do you sail from?

(c) details of geographical limits
(i.e. inland, offshore or trans-ocean)

If racing what category do you race in (i.e. categories 1 - 4):

(a) is it offshore or trans-ocean?

(b) what is the maximum duration of event?

(c) number of races per annum

10 Scuba diving (as a leisure pursuit only — if otherwise complete section 11)

For how long have you taken part in this sport?

Approximately how many times each year do you dive?

What are your diving qualifications?

Where as a general rule do you dive? State location and whether deep sea/coastal waters/lakes/rivers

Are you a member of a sub-aqua club? Yes No

If Yes, please give details

Do you participate in cave or wreck diving? Yes No

If Yes, please give details

Do you engage in non club activities?	Yes	No
If Yes, please state:		
(a) whether accompanied	Yes	No
(b) object of such activities		
What depth do you usually dive to?		
What is the maximum depth you have dived to?		
Do you ever dive for profit or reward?	Yes	No
If Yes, please give details and complete section 11		

Employment details

11 Diving

What is your precise occupation?		
Please give full details of your duties		
Where did you receive your training?		
What are your diving qualifications?		
For how many years have you been:		
(a) shallow water diving?		(b) deep sea diving?
Give details of:		
(a) number of dives per annum and duration of same		
(b) geographical limits		
(c) type of equipment used		
Do you use explosives?	Yes	No
If Yes, please give details		
What are the maximum depths to which you dive?		
If in excess of 120 ft will decompression facilities always be available and within how many minutes of surfacing point?		
If in excess of 180 ft will a diving bell or submersible decompression chamber be used and what is the maximum time spent underwater?		
Do you participate in the saturation technique of diving?	Yes	No
If Yes, please give details		
Do you ever operate from pipe-laying barges?	Yes	No
If Yes, please give details		
Do you ever operate from oil/gas rigs?	Yes	No
If Yes, please state number of flying hours per month by helicopter.		

12 Fishing industry

What is your precise occupation.
Please give full details of your duties

- On what size and type of vessel do you work?
- Give details of:
- (a) distance from shore
 - (b) geographical limits
 - (c) number of nights spent at sea on each journey

13 Oil and gas rigs

What is your precise occupation.
Please give full details of your duties

Are you land based or off-shore?

Exact geographical area where you usually work?

What mode of transport is used for travel to
and from the rig?

What is the maximum length of time spent on the rig?

Do your duties involve diving? Yes No

If Yes, please complete the diving section of this questionnaire (Section II)

14 Merchant marine

What is your precise occupation.
Please give full details of your duties

On what size and type of vessel do you work?

Give details of:

- (a) geographical limits
- (b) ports of call
- (c) nature of cargo

15 Mining and tunnelling

What is your precise occupation.
Please give full details of your duties

How long have you been employed in this type of work?

Give details of:

- (a) number of hours spent underground per week
- (b) average and maximum depths worked at
- (c) geographical limits

Do you use explosives? Yes No

If Yes, please give details

16 Aviation details

(i) Flying experience

Have you ever flown as a pilot Yes No

If Yes, please state

- (a) when you learnt to fly
- (b) type(s) of license held
- (c) whether you ever had your license revoked

or been grounded Yes No

If Yes, please give details

(d) number of flying hours as a pilot total to date in last 12 months

total expected per annum in future

(ii) Private flying

Do you intend to fly in a club or privately owned aircraft? Yes No

If Yes, please state:

- (a) expected flying hours per annum as pilot as passenger
- for pleasure or recreation
 - for business purposes
 - as civilian flying instructor
- (b) geographical limits
- (c) whether flights will be between recognised airfields (if not, give details)

(d) type(s) of aircraft flown (including manufacturer's name, model name and number)

- (e) operator of aircraft
- (f) who maintains the aircraft
- (g) nature of any flying instruction you give (e.g. club or commercial flying ab initio or advanced training)
- (h) full details of any local, national or international air competitions, formula air racing, aerobatics, etc you are likely to engage in
- (i) whether you will be engaged in any low level flying (e.g. crop spraying, aerial surveying, etc)

(iii) Flying as commercial or executive aircrew

Do you intend to fly as commercial or executive aircrew? Yes No

If Yes, please state: as pilot as other aircrew

- (a) expected flying hours per annum
- (b) precise capacity in which you fly (e.g. pilot, navigator, cabin staff, etc)
- (c) name of employer/operator of aircraft
- (d) who maintains the aircraft (if different from (c))
- (e) nature of flights (e.g. scheduled, charter, airtaxi, crop spraying, etc)
- (f) type(s) of aircraft (including manufacturer's name, model name and number)
- (g) geographical limits

(h) whether flights will be between licensed airfields

(iv) Flying as a civilian test pilot or technical observer

Do you intend to fly as a civilian test pilot or technical observer?

Yes

No

If Yes, please state:

as a test pilot

as a technical observer

(a) expected flying hours per annum

(b) precise nature of flights (give details)

(c) name of employer

(d) nature of aircraft

(i.e. type and whether prototype, new, reconditioned etc)

(v) Service flying

Do you intend to fly as a member of the armed forces or reserves?

Yes

No

If Yes, please state:

(a) exact branch of the services involved

(b) what rank you hold

(c) nature of flying involved

(d) approximate number of flying hours per annum

(vi) Gliding

Do you intend to participate in gliding?

Yes

No

If Yes, please state:

(a) expected flying hours per annum in unpowered gliders

self launching gliders

(b) geographical limits

(c) full details of any competitions you are likely to engage in

(vii) Other flying

Do you intend to participate in any form of flying,
not included elsewhere on this form, eg. microlights Yes No

Yes

No

If Yes, please state

(a) exact nature of flying involved

(b) expected flying hours per annum

Other

Please use this space for details of participation in any
pursuit or occupation not mentioned

Declaration

I understand and agree that the information I have provided in this questionnaire is material to the decision of Irish Life Assurance plc (Irish Life) to enter into the contract, on the terms and for the calculation of premium and that Irish Life has relied on this information in so doing.

I have read over the answers to all the questions on this form and declare that all answers (including any answers written down for me) are true and complete. I declare that I have answered all of the questions in this form honestly and with reasonable care.

I have read and understood the important information about my obligation to answer all questions asked by Irish Life in this questionnaire and I understand that if I do not answer these questions honestly and with reasonable care, Irish Life will be entitled (depending on the breach) to declare the plan void, refuse my claim, treat my insurance as if it was entered on different terms, or reduce my claim. If this happens, I understand and acknowledge there may be no cover under the plan, Irish Life may not refund my premiums and Irish Life may not pay a claim.

I understand that this questionnaire will form part of my application for cover and that a copy of the completed questionnaire is available to me on request. I understand that we must advise Irish Life in writing of any change to our application answers between the date of our application and the date I am accepted for cover by Irish Life.

Please sign
and date

Signature of life proposed

Date

Please be aware for all signatures typed herein, you are electronically certifying this document, just as if you were physically signing on paper.

Please sign
and date

Signature of proposer Date
(if other than the life proposed)

Date

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