



STATE LIFE INSURANCE CORPORATION OF PAKISTAN

State Life Building 15-A Sir Agha Khan Road, (Davis Road) Lahore.

GROUP & PENSIONS DIVISION

For Office Use Only

Certificate No. _____ Date: _____ Registration No. _____ Date: _____

Please tick

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Application for Insurance of Pakistani Emigrants Proceeding Abroad For Employment.

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Application for Insurance Pakistani Emigrants Registered Abroad By Pakistani Mission.

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Application for Renewal of Insurance of Pakistani Emigrants Working Abroad.

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| Name Of Applicant | Muhammad Farooq Hassan |
| Father's/Husband's Name | Hassan |
| Date & Place Of Birth | |
| N.I.C No | 6 1 1 0 1 2 1 0 8 8 2 5 0 |
| Particulars Of Passport | No. WF6801671 Issued _____ Date _____ Place _____ Occupation Job |
| Postal Address In Pakistan For Dispatch Of Insurance Certificate | |
| Address Abroad | Adrees |
| Name And Address Of The Employer Abroad | Adrees |
| Particulars Of Person To Whom Insured Amount Is Payable In The Event Of Death Of The Insured Person | Name _____ Relation with Emigrant _____ Address _____ |
| Amount Of Insurance | Rs. 1,000,000/-(Rupees One Million Only) |
| Period Of Insurance | Two years |
| Date Of Commencement/Renewal Of Insurance | Apr 26, 2023 |
| Amount Of Premium Paid | Rs. 2500/- (Rupees Two Thousand Five Hundred only) |
| Details Of Previous Insurance Certificate | Reg. _____ Date: _____ |

I hereby declare that the particulars given above in the application form are true & correct. In case of any misstatement state life/bureau shall have the right to cancel issued on the basis of this FORM 'G' and take any legal action which it may deem fit. I understand that in case of issuance of two or more insurance certificates to me the claim will be payable on only one insurance certificate.

Note: In case of registration abroad the coverage will commence from the date of issuance certificate by state life insurance corporation.

Signed On _____ This Day _____ of _____ at _____ In Presence of Witness _____

Signature/L.T.I.
Of The Emigrant with Date

Witness Name: _____ Sign _____ N.I.C. No. _____
Attested By _____

CWA/Deal and Signature