

For customers

Commercial diving questionnaire

To be completed by the insured person.

Please complete in BLOCK CAPITALS and in ballpoint pen.

1. Insured person's details

Policy/Reference number

Surname

Title

Mr / Mrs / Miss / Ms / Other – please specify

Date of birth (dd/mm/yyyy)

Full forename(s)

If you don't answer the questions fully and accurately, we may not pay a claim, and the whole policy may be cancelled, not just the benefit under which you're claiming.

2. Questions

2.1 When and where did you learn to dive?

2.2 How long have you been a professional diver?

2.3 Please give the name and grade of your qualifications.

2.4 Who's your current employer?

2.5 When were you last medically examined in connection with your diving? Give your doctor's name and address, and the date you were examined.

2.6 Where do you normally dive? UK/Overseas – tell us the countries and whether it was in deep sea/coastal waters/lakes/ivers.

2. Questions – continued

2.7 What are your exact duties while you're diving?

2.8 Do you ever use explosives?

No

Yes – give details

2.9 How many times a month do you dive?

2.10 a. What's the average depth you dive to?

b. What's the maximum depth?

2.11 a. What's the average length of time for each dive?

 minutes

b. What's the maximum length of time?

 minutes

2.12 Do you do saturation diving?

No

Yes – how many times a month?

2.13 Do you always dive as part of a team?

No – how many solo dives do you make each month?

Yes – how many are there in the team?

2.14 Have you ever had a diving accident?

No

Yes – give details

2.15 Do you dive for pleasure?

No

Yes – please also complete our Sports diving questionnaire

3. Declaration

I acknowledge this questionnaire forms part of my application. To the best of my knowledge, the information and statements made in this questionnaire are true and complete. If the statements aren't true and complete and/or I don't tell Aegon about any changes before the policy starts, then it **might result in loss or cancellation of the protection**. I confirm that I've read over any answers that I didn't fill in and they're correct.

Date (dd/mm/yyyy)

Signature

X	X
---	---

