



## STEP 2 – MEDICAL INFORMATION (continued)

5 (b) Are you at present receiving medical treatment or taking any medicine or drugs or are you aware of any impending medical or surgical treatment?

Yes / No (If yes, please give details)

5 (c) Have you ever had treatment or a blood test in connection with AIDS, hepatitis B or any sexually transmitted disease, or been advised to do so?

Yes / No (If yes, please give details)

6. Habits - (a) Tobacco - Have you smoked any tobacco product in the last 12 months?

Yes

No

If yes, please state average current consumption

 daily / weekly

If no, is it your resolve not to do so in the future?

Yes

No

(b) Alcohol - State average quantity consumed (social/occasional not acceptable)

 daily / weekly

7. Height and weight - Please give details of your current height and weight: Height (without shoes)

Height

ft.

ins.

cms.

Weight (in indoor clothes)

Weight

st.

lbs.

kgs.

8. Family history - Has either parent, or any brother or any sister suffered from high blood pressure, heart disease, stroke, diabetes or cancer?

Yes / No  
Relationship

(If yes, please give details)  
Conditions and age when suffered

**If your proposal for insurance is declined or if you are offered insurance on special terms then this fact will be noted on a central registry, administered by the Irish Insurance Federation, and may be shared with other insurance companies as a protection against non-disclosure of material facts.**

## STEP 3 – DECLARATION

### Declaration

I consent to Phoenix Ireland seeking medical information at any time from any doctor who has attended me concerning anything which affects your physical or mental health or seeking information from any insurance office to which a proposal has been made for insurance on my life and I authorize the giving of such information. I confirm that I have read over any answers not filled in by me in my own handwriting and that all the answers and statements are true and complete.

I agree that this application will form the basis of the contract with Phoenix Ireland and that non-disclosure or misrepresentation in the application or in other information furnished in connection with the application including any answers given to a medical examiner acting for Phoenix Ireland may constitute grounds for rejection of a claim.

Signed

X

Date

Phoenix Ireland is the trading name used by Scottish Mutual International Limited and Phoenix Life Limited.

Scottish Mutual International Limited is authorised and regulated by the Central Bank of Ireland and is registered in Ireland (Company No. 242244).

The company's registered office is 25-28 North Wall Quay Dublin 1, Ireland. An up-to-date list of its directors, containing the particulars required by paragraphs (a), (b) and (c) of section 196(1) of the Companies Act 1963, is available upon request from the company's registered office.

Phoenix Life Limited is authorised and regulated in the United Kingdom by the Financial Services Authority. Phoenix Life Limited is incorporated in England (Company No. 1016269) and has a registered branch in Ireland (Branch No. 906073). The company's registered office is 1 Wythall Green Way, Wythall, Birmingham B47 6WG United Kingdom. Its directors are A B Davidson (UK), J P Evans (UK), M J Merrick (UK), A Moss (UK), M D Ross (UK), J C Park (UK), W R Treen (UK), M N Urmston (UK) and J Yates (UK).

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