



## Guardian Life Insurance Limited

Corporate Head Quarter: Police Plaza Concord (13<sup>th</sup> Floor),  
Tower#02, Plot#02, Road # 144,  
Gulshan Avenue, Dhaka-1212.

### AMENDMENT TO PROPOSAL FORM FOR POLICY

PROPOSAL NO: \_\_\_\_\_

I, \_\_\_\_\_ hereby request that my Proposal  
Form dated \_\_\_\_\_ 20\_\_\_\_\_ be amended as follows:

Plan No:	Plan Name:
Term:	
Occupation Details:	
Rider: <input type="radio"/> Add:	<input type="radio"/> Delete:
Residence Address:	
Permanent Address:	
Others (If any):	

and I declare that there has been no change in my condition of health, and/or that of all insured under this Proposal Form, I/We don't have received any medical attention, consultation or examination since the date of completion of said Proposal Form; further that all of my answers as written above are true. This declaration will be a part of my Insurance Contract.

Signed at \_\_\_\_\_ Signing Date: \_\_\_\_\_  
(City/district)

\_\_\_\_\_  
Witness (F.A./U.M./B.M) Sign.

\_\_\_\_\_  
F.A./U.M./B.M Code

\_\_\_\_\_  
Signature of Proposed Insured

**NOTE: This UW\_PA Form will not be applicable for Amendment of Witness Signature, Proposed Insured Signature and F.A Report.**