

Income Fluctuation Questionnaire

This statement should be completed by the person to be insured.

Application/policy number:

Full name:

Date of birth:

We note that there has been a fluctuation in your income over the past couple of years. Can you please provide details of the circumstances surrounding these variations and attach any evidence which you feel may assist us in understanding your current financial situation.

Declaration

I declare that the answers given are true and correct to the best of my knowledge, and I agree that they shall form part of my application for insurance. I further declare that there has not been any change in my health, occupation or pastimes since completely my application for insurance. Any changes are noted below:





Name (please print):

Date:

Signature:

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Macquarie Life

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