

# Group Life Insurance Underwriting Analysis Form

## 1. Group Information

Company/Group Name	Address	Contact
Person	Contact Phone	Email

## 2. Group Profile

Nature of Business	Number of Employees
Average Age	Date Established

## 3. Plan Details

Sum Insured per Employee	Plan Type	Select	Additional
Benefits (if any)			

## 4. Medical & Claims History

Previous Insurer (if any)	Past 3 Years Claims Ratio
	Notable Claims/Incidents

## 5. Underwriter's Notes & Remarks

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