

APPLICATION NO. 201 15/1/02  
 POLICY NO. 23654

**FOR THE AGENT USE ONLY.**

Kind Term Male Amount \$ £3000 Age 61 Yrs  
 Section Tontine Matures End. Matures 19 Form ✓  
 Prem. £150-0-0 payable 15th January Wester Pol. ✓

**THE MANUFACTURERS AND TEMPERANCE AND GENERAL LIFE ASSURANCE COMPANY.**  
 Head Office: TORONTO, CANADA. JAN.

1.—Name (in full) of life to be insured?  
NOTE.—When applicant is a woman give also name of father; if married, give also maiden name and name of husband.  
His Britannic Majesty Edward VII

2.—Residence (P.O. Address) \_\_\_\_\_ Co. of \_\_\_\_\_ Prov. of ONT

3.—Particulars of birth?

PLACE	DAY	MONTH	YEAR	Age next birthday. (Make sure this agrees with date of birth.)

4.—Occupation? (a) (Mention exact line of business; if more than one, state all.)  
 (b) Do you contemplate changing your occupation?  
 (a) King of Great Britain  
 (b) \_\_\_\_\_

5.—(a) State your former occupations and date of change.  
 (b) Have you ever been connected with the sale or manufacture of intoxicating liquors?  
 (a) \_\_\_\_\_  
 (b) \_\_\_\_\_

6.—Are you married? \_\_\_\_\_

7.—(a) Are you, and have you been, uniformly sober and of temperate and regular habits? (a) \_\_\_\_\_ (b) \_\_\_\_\_  
 (b) Do you use alcoholic liquors? (c) \_\_\_\_\_  
 (c) Are you a total abstainer? (d) \_\_\_\_\_  
 (d) How long have you been so? (e) \_\_\_\_\_  
 (e) Do you wish to insure in the Temperance or General section? (f) \_\_\_\_\_

8.—Sum to be insured? £3000  
 9.—Kind of Policy? Term  
 10.—What Tontine period is required? \_\_\_\_\_ Years  
 11.—Are premiums to be payable annually or semi-annually, or quarterly?  
 12.—Amount of Premium? £150-0-0

13.—Name in full and occupation of person to whom insurance is to be paid in event of death?  
London City and Midland Bank Ltd.

14.—State relationship of beneficiary to applicant. If no relationship exists, what insurable interest is there in life to be insured?  
his successor appointed or assigns

15.—To whom do you wish the policy payable should you survive the Endowment or Tontine Period?  
Issued 15/1/02 ✓

COMPANY.	AMOUNT.	KIND OF POLICY.	YEAR WHEN TAKEN.

16.—Are you already insured in this or other Company? Give details.

17.—Name, Address and Occupation of intimate friend for reference, (not a relative).

18.—Have you ever made any proposal, or opened any negotiations for insurance on your life, with any person or Company, upon which a policy was not issued on the plan applied for? If so, state name of person or company, when applied for, and why rejected.

19.—Has there ever been anything to your knowledge or belief, in your condition or family, or personal history, occupation, or habits, which renders a risk on your life more than usually hazardous, or that tends to impair your constitution or to shorten your life?

20.—Have you paid the first premium upon the policy applied for?  
 ANSWER: The \_\_\_\_\_ annual premium of \$ \_\_\_\_\_ has been paid by \_\_\_\_\_ (cash, or cash and note), upon the conditions that, if the risk is not assumed by the Company, this sum is to be refunded, in accordance with the Company's printed form of receipt, given me by the agent as voucher for the said payment, and that if I shall not receive a policy or the return of the above payment within one month, I shall immediately notify the Company, at its Head Office, Toronto, personally, or by registered letter.

I declare and agree that I am now in and usually have sound health; that the above answers are true to the best of my belief; that this declaration, with the answers to be given by me to the Medical Examiner, shall be the basis of the policy; that the methods which may be adopted by the Company, for any said policy; that I will accept said policy when issued and pay the first premium thereon; that said policy shall not take effect until the first premium has been paid during my life and good health; that if any premium be settled wholly or in part by cheque, note, or other obligation, such obligation shall not be considered as payment, but only as an extension of the time for payment, and if not fully paid when due, the Company shall not be liable if death occurs thereafter; that non-payment of any premium when due shall void said policy, except as provided by same; that no suit shall be brought against the Company in connection with said policy later than one year after the time when the cause of action accrues; and that if I die by my own act, whether sane or insane, within one year from this date, then said policy shall be void.

I have here (sent in an accompanying letter) any special clause or provision desired in the policy.

Head Office not com.  
Geo. S. Burnett  
(Signature of Agent or other Witness.)

Dated at \_\_\_\_\_  
 on the \_\_\_\_\_ day of \_\_\_\_\_ 1902.

**POLICY OF  
 KING EDWARD VII, 1902**

In all other cases the Beneficiary shall be the Estate of the Insured.