

**Policy Number:** HATI58384/2015**Date of Issue:** 27/06/2015**Conditions Screened**

Mr Richard Robinson

04/11/1941

Conditions covered

**Controlled blood pressure**

How many medicines does your doctor advise you to take for high blood pressure?

**1**

Has your dose been increased or have you been prescribed a new tablet in the last six months?

**No**

Have you been advised to take medication to lower your cholesterol?

**Yes****Cholesterol levels**

Has a blood test EVER at any time shown your cholesterol level to be raised?

**Yes**

Have you been advised to take medication for high blood pressure?

**I have already declared high blood pressure**

Have you ever been a smoker?

**No****IMPORTANT:**

If you have ever had treatment/medication for a medical condition in the past this must be declared. Claims relating to pre-existing medical conditions will NOT be covered unless ALL conditions have been declared to us.

Please check that the information shown here and on the Policy Schedule is correct. If not, please contact us immediately on 0800 294 2969 in order for us to correct the information.

If you have not requested cover for any pre-existing medical conditions, please be aware that your policy will exclude any claims arising from or traceable to ANY pre-existing medical condition. Your Insurer will provide cover for anything unforeseen.

