Allied Insurance Company

of the Maldives Pvt Ltd

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Proposal for
PERSONAL ACCIDENT INSURANCE FOR
TOURIST & TRAVELERS
INCLUDING FLYING AS A TICKET HOLDING PASSENGER IN AIRCRAFT
OPERATED BY AN AIR TRANSPORT ORGANISATION PROVIDING REGULAR AIR SERVICES

Excluding suicide, war, invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection or military or usurped power, strike riot or civil commotion and (unless declared hereunder and specifically accepted by the company for insurance racing, motor cycling, mining, hunting, mountaineering, and winter sports.

1 Name in full .....

2 Address .....

3. Occupation ..... Age next Birthday .....

4. Outline of Tour and name of Air Line used (if any) .....

5. Purpose of Trip : ..... if other than recreational, please describe your work

.....

6. Period of Insurance { From 00.01 Hours on the ..... / To 23.59 Hours on the ..... } Number of Days ..... / Weeks ..... / Months .....

7. Are you in sound physical and mental health to undertake this Journey.....

8. Will you engage in racing, motorcycling, hunting, mountaineering Or winter sports } .....

9. Are you already insured against Accidents with this or any other Company or do you intend to effect any other insurance against Accidents with this or any other Company in respect of this Journey? If so, please give particulars } .....

10. Has any Insurer declined, required special terms to insure you, cancelled, refused to renew your insurance, or increased your premium on renewal? } .....

11. Sum to be insured for death..... Premium .....

I desire to effect with the Company an insurance in terms of the policy used for this class of business and I warrant that the above statements and particulars are correct and complete. I agree that this proposal shall be the basis of the contract between me and the Company.

Date..... Proposer's Signature .....

THE INSURANCE WILL NOT BE IN FORCE UNTIL THE PROPOSAL HAS BEEN ACCEPTED BY THE COMPANY.

You are to disclose in the proposal form, fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder may be void.