INSURANCE SCHEME REQUIRED: Plan (A) Asian Countries Plan (B) Worldwide excluding USA & Canada Plan (C) Worldwide including USA & Canada Travelling Visa Type: Normal Schengen MEDICAL HISTORY Details of any Pre-existing medical condition / sickness / illness: Have you ever made a claim under any Accident, Sickness, Medical Expenses or any other section of the Policy? If YES, please give particulars: NO YES Are you in Sound Mental and Physical Health to travel? YES NO NOMINEE FOR RECEIVING DEATH BENEFITS Name and Address: NIC / Passport Number: Relationship with the applicant: CONTACT PERSON IN CASE OF EMERGENCY: Local: Name: Address: Contact Number:

Name: Address: Contact Number: Are there any other Travel Insurance in force with this or other company? If YES, state amounts and the names of companies. YES NO Has the Insurance now proposed or any other insurance proposed by you been Declined, Cancelled or Increased your premiums on renewal by any insurance company? YES NO					
Contact Number: Are there any other Travel Insurance in force with this or other company? If YES, state amounts and the names of companies. YES NO Has the Insurance now proposed or any other insurance proposed by you been Declined, Cancelled or Increased your premiums on renewal					
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you been Declined, Cancelled or Increased your premiums on renewal					
you been Declined, Cancelled or Increased your premiums on renewal					
you been Declined, Cancelled or Increased your premiums on renewal					
by any insurance company? YES NO NO					
Please submit with this Proposal, a medical report, Copy of Passport \slash					
NIC copy, Travel documents including, copy tickets, any additional					
information which you feel may be useful to the Company in assessing					
the risk					
DECLARATION					
I/We authorize Solarelle Insurance Private Limited to collect or disclose					
any personal information relating to this insurance to/from any other					
insurers or insurance reference service.					
I/We declare that I/we have read and understood the duty of disclosure,					
non-disclosure and policy conditions contained herein and confirm that					
no information has been withheld which could affect the acceptance of					
this application.					
(No insurance cover is provided until the above proposal is accepted and					
details of cover are confirmed in writing by Solarelle Insurance Private Limited)					
Lillined)					
Name of proposer:					

Signature of proposer:

Date:

	All values in US\$	Plan A	Plan B	Plan C
Section	Description	Asian countries	Worldwide Excluding USA & Canada	Worldwide
Α	Emergency medical and repatriation costs	50,000 / 75	75,000 / 75	100,000 / 75
В	Personal accident	10,000	15,000	20,000.00
С	Cancelling or cutting short your trip	2,000/50	2,000/50	2,000/50
D	Missed departure	150	200	250.00
Е	Travel Disruption	150/25	200/25	250/25
F	Personal money, passport and documents	200	250	300.00
G	Personal possessions and baggage	500	1,000	1,000.00
Н	Personal liability	10,000	15,000	20,000.00
	Legal expenses	10.000	15.000	20.000.00



Solarelle Travel Safe Insurance

Solarelle Insurance Pvt Ltd

1st Floor, ADK Tower, Ameer Ahmed Magu, Male' 20096 Republic of Maldives

Customer Services:

1413 (Local Calls) or +960 3300099 (International calls)

SECTION A – EMERGENCY MEDICAL AND REPATRIATION COSTS

What is covered?

We will pay you up to the Emergency medical and repatriation limit in your policy schedule for the following expenses which are necessarily incurred during a trip as a result of you suffering unforeseen bodily injury, illness, disease and/or compulsory guarantine:

- 1. Emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred outside of your home country.
- 2. Emergency dental treatment for the immediate relief of pain (to natural teeth only) up to a limit of US\$ 500 incurred outside of your home country.
- 3. With the prior authorization of the Assist America Asia Limited, the additional costs incurred in the use of air transport or other suitable means, including qualified attendants, to repatriate you to your home if it is medically necessary. These expenses will be for the identical class of travel utilized on the outward journey unless the Assist America Asia Limited agrees otherwise. (Please refer to the complete wordings)

Medical assistance abroad Payment for medical treatment abroad

SECTION B - PERSONAL ACCIDENT

What is covered?

We will pay one of the Personal accident benefits shown in your policy schedule if you sustain bodily injury which shall solely and independently of any other cause, result within one year in your death, loss of limb, loss of sight or permanent total disablement as per table of benefits below. (Please refer to the complete wordings)

SECTION C - CANCELLING OR CUTTING SHORT YOUR TRIP

What is covered?

We will pay you up to the amount shown in your schedule for any irrecoverable unused travel and accommodation costs and other pre-paid charges which you have paid or are contracted to pay, together with any reasonable additional travel expenses incurred (please refer to the complete wordings)

SECTION D - MISSED DEPARTURE

What is covered?

We will pay you up to the amount in your policy schedule for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching your overseas destination or returning to the Maldives, if you fail to arrive at the departure point in time to board the public transport on which you are booked to travel on for the initial international outbound and return leas of the trip as a result of:

- 1. The failure of other public transport or
- 2. An accident to or breakdown of the vehicle in which you are travelling or
- 3. An accident or breakdown happening ahead of you on a public road which causes an unexpected delay to the vehicle in which you are travelling or
- 4. Strike, industrial action or adverse weather conditions. (Please refer to the complete wordings)

SECTION E - TRAVEL DISRUPTION

What is covered?

Before you reach your destination

1. We will pay you up to the Travel Disruption limit in your policy schedule for your unused travel, accommodation (including excursions) and other Pre-paid charges that you cannot claim back from any other source if you cannot travel and have to cancel your trip as a result of: (please refer to the complete wordings)

While you are at your destination

2. We will pay you up to the Travel Disruption limit in your policy schedule for your unused travel, accommodation (including excursions) and other pre-paid charges that you cannot claim back from any other source together with any reasonable additional travel and accommodation costs (room only) which are of a similar standard to that of your pre-booked travel and accommoda tion if you have to: (please refer to the complete wordings).

On the way home

3. We will pay you up to the Travel Disruption limit in your policy schedule for your reasonable additional travel and accommodation costs (room only) which are of a similar standard to that of your pre-booked travel and accommodation that you cannot claim back from any other source if you have to make alternative arrangements to return to your home or stay longer outside of your home country as a result of: (please refer to the complete wordings)

SECTION F - LOSS OF PASSPORT

What is covered?

- 1. We will pay you up to the passports limit in your policy schedule for the accidental loss of, theft of or damage to documents (including the unused portion of passports, visas and driving licenses).
- 2. We will pay you up to the amount shown in your policy schedule for reasonable additional travel and accommodation expenses necessarily incurred outside your home country to obtain a replacement of your passport or visa which has been lost or stolen outside your home country. (Please refer to the complete wordings)

SECTION G - LOSS OF CHECKED IN BAGGAGE

What is covered?

1. We will pay you up to the baggage limit in your policy schedule for the complete and permanent loss of the checked in baggage. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation (loss of value), or we may replace, reinstate or repair the lost or damaged baggage. (Please refer to the complete wordings)

SECTION H - PERSONAL LIABILITY

What is covered?

We will pay you up to the amount in your policy schedule (including legal costs and expenses) against any amount you become legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause for accidental:

- 1. Bodily injury, death, illness or disease to any person who is not in your employment or who is not a Close relative or persons residing with you but not paying for their accommodation.
- 2. Loss of or damage to property that does not belong to and is neither in the charge of or under the control of you, a Close relative and/ or anyone in your employment other than any temporary holiday accommodation occupied (but not owned) by you. (Please refer to the complete wordings)

SECTION I – LEGAL EXPENSES

What is covered?

We will pay up to the limit in your policy schedule for legal costs to pursue a civil action for compensation, against someone else who causes you Bodily injury, illness or death.

Special conditions relating to claims

- 1. We shall have complete control over the legal case through agents we nominate, by appointing agents of our choice on your behalf with the expertise to pursue your claim.
- 2. You must follow our agent's advice and provide any information and assistance required within a reasonable timescale.
- 3. You must advise us of any offers of settlement made by the negligent third party and you must not accept any such offer without our permission.
- 4. We may include a claim for our legal costs and other related expenses.
- 5. We may, at our own expense, take proceedings in your name to recover compensation from any third party for any legal costs incurred under this policy. You must give us any assistance we require from you and any amount recovered shall belong to us.

Solarelle Travel Safe

Proposal form

Completing the Proposal form

- 1. This proposal must be fully complete including all the required documents
- 2. It is a duty of prosper to disclose all the material facts, if it would influence the judgement of a prudent insurer.
- 3. Insurance is based on utmost good faith and in the absence of such good faith, Solarelle may treat your policy as if it never existed if the misrepresentation or your non-compliance with your duty of disclosure was fraudulent.
- 4. Solarelle assure for the Personal or Sensitive Information/s that we collect are secured from the proposer is secured. Without such Information Solarelle may not be able to process your application, administer your policy or assess your claims.
- 5. Solarelle may obtain Information from government offices and third parties to assess a claim in the event of loss or damage.

PERSONAL INFORMATION

C

ame of the Proposer:					
ddress:					
D/Work Permit Number:					
assport Number:					
ate of Birth:					
ontact Number:					
mail:					
TRAVELLING INFORMATION					
eriod of Travelling:					
rom: d d m m y y To: d d m m y y					
urpose of the Trip:					
Holiday Business					
Study / Training Others (PleaseSpecify)					
Conference / Seminers					
Exhibition / Fair					
L'Alliotton / Tan					
ountry / Countries Travelling to:					