

# TRAVEL INSURANCE APPLICATION FORM

## A. The Insured's information

The Applicant			
Correspondent address			
Telephone		Fax No.	
Business license No.		Tax code	
Business field			

## B. Insurance Coverage

Number of insured persons to be covered	<i>(as per the list attached)</i>		
The Tour			
Coverage	<input type="checkbox"/> Domestic <input type="checkbox"/> International <input type="checkbox"/> Outbound <input type="checkbox"/> Inbound		
Insurance period	From : .....hour .....min., date..... month..... year ..... To : .....hour .....min., date..... month..... year .....		
Sum insured for person <i>(Unit: VND)</i>	<input type="checkbox"/> 10 million <input type="checkbox"/> 20 million <input type="checkbox"/> 30 million	<input type="checkbox"/> 40 million <input type="checkbox"/> 50 million <input type="checkbox"/> 60 million	<input type="checkbox"/> 70 million <input type="checkbox"/> 80 million <input type="checkbox"/> 90 million <input type="checkbox"/> 100 million <input type="checkbox"/> 200 million Other.....
Sum insured for luggage <i>(Unit: VND)</i>	...../ person		
Total sum insured			
Total sum insured in words			

## C. Mode of Payment

<input type="checkbox"/> Bank transfer	<input type="checkbox"/> Cash at the Company	<input type="checkbox"/> Cash via Agent or Sales staff
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## D. Language of the Policy

<input type="checkbox"/> English	<input type="checkbox"/> Vietnamese
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## E. Declaration

(1) We hereby declare that the statements made by us in the Application Form are complete and true to the best of our knowledge and belief, and we hereby agree that this Application Form shall form the basis and be part of any Policy of Policies issued in connection with the above risk or risks.  
 The Insured undertakes to inform the Insurers of any material alteration whereby the risk is increased, and the Insurers reserve the right to modify any quotation made in the light of such alteration.

(2) According to Item a Clause 2 Article 19 of Law on Insurance Business: "An insurer shall have the right to suspend unilaterally the implementation of an insurance contract and to collect the insurance premium up until the time of suspension of implementation of the insurance contract, upon one of the following acts being committed by the purchases of insurance:  
 a) Intentionally providing false information with the aim of entering into an insurance contract in order to be paid insurance proceeds indemnity;"

(3) The Insurance Policy is valid subject to the Insurer's agreement

  
  
  
  
  
  
  
  
  
  

_____	_____
Date (dd/mm/yyyy)	Signature & Company Stamp

For Phu Hung only:

Application type:  Renew  New Channel:

Sellers' s name/ code:

**LIST OF INSURED PERSONS TO BE COVERED  
TRAVEL INSURANCE**

Full Name	Address	Gender	Date of birth	ID No./ Passport No.	Nationality	Remark

**Total insured persons to be covered:**

**The Tour:**

**APPLICANT**  
*(Signature & Company Stamp)*

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For Phu Hung only:

Application type:  Renew  New

Channel:

Sellers' s name/ code: