

Premier Insurance Co. (Nepal) Ltd.

Premier Bhawan, Naxal, P.O.Box 9183, Kathmandu, Nepal.



TRAVEL MEDICAL INSURANCE PROPOSAL

(This insurance is not valid for one way trip. Please ensure that you include departure and return date information requested in the Proposal Form)

1	Name of Person to be insured (in full): Mr./Mrs./Miss:		
	Name: <input type="text"/>	Date of Birth: <input type="text"/>	
	Passport No. <input type="text"/>		
	Name of Travelling Dependents		
	Name: <input type="text"/>	Date of Birth: <input type="text"/>	
	Passport No. <input type="text"/>		
	Name: <input type="text"/>	Date of Birth: <input type="text"/>	
	Passport No. <input type="text"/>		
	Name: <input type="text"/>	Date of Birth: <input type="text"/>	
	Passport No. <input type="text"/>		
1.1	Occupation:	<input type="text"/>	
2	Contact Details (including your permanent address and telephone number):	<input type="text"/>	
		<input type="text"/>	
3	Details of Journey: From: <input type="text"/>	To: <input type="text"/>	
3.1	Purpose of Journey (Please tick as appropriate):		
	Holiday/Leisure <input type="checkbox"/>	Conference/Seminar <input type="checkbox"/>	Exhibitions/Trade Fair <input type="checkbox"/>
	Study <input type="checkbox"/>	Training <input type="checkbox"/>	Business <input type="checkbox"/>
	Others (Please advise) <input type="text"/>		
3.2	Selected Plan Area	<input type="text"/>	
3.3	Schedule of Cover : A, B, C - D, E, F, G, H, I, J, K, L, M, N (Medical Expenses + Personal Accident Cover A - C)		
	(a) Worldwide including USA and CANADA (Package Cover A - N of Schedule of Cover)		
	(b) Worldwide excluding USA and CANADA (Package Cover A - N of Schedule of Cover)		
	(c) Asian Countries (Thailand, Malaysia, Singapore, Philippines, North Korea, South Korea, Indonesia, China including Hong Kong, Taiwan, Japan, Laos, Cambodia, Vietnam, Myanmar, Macao, Mongolia, Timor and Letse) (A - I of Schedule of Cover)		
	(d) SAARC Countries (India, Bangladesh, Maldives, Bhutan, Sri Lanka, Pakistan & Afghanistan) (A & B of Schedule of Cover)		
	(e) Student Plan: (A & C of Schedule of Cover)		
4	Duration of trip: From: <input type="text"/>	To: <input type="text"/>	
5	Contact person in case of an emergency (including their address and telephone number):		
	a) Local		
	<input type="text"/>		
	<input type="text"/>		
	b) Country of Visit		
	<input type="text"/>		
	<input type="text"/>		

IMPORTANT POINTS:

This is your insurance policy. Please read the contents carefully to ensure that it meets your requirements.

This is not a general health insurance policy but is intended to reimburse you for medical costs and expenses incurred for an emergency sickness or accident whilst on a trip outside of Nepal as per policy terms and conditions. There is no cover for pre-existing medical conditions, for treatment that you may be receiving prior to a trip, if you on a waiting list for inpatient hospital care, where there are circumstances surrounding your health that are likely to increase the risk of incurring medical expenses abroad or where you have been given a terminal prognosis. If in any doubt please contact us for verification of the coverage under this policy.

Please Note: Failure to comply with the terms and conditions contained in this policy may invalidate any claim that you may have condition.

Health Conditions

1. Nature of coverage: This policy is not a General Health Insurance. Policy Coverage is intended for use by the Insured in the event of a sudden and unexpected sickness or accident arising when the Insured is outside of his home country.
2. Pre-Existing Exclusion: This policy does not cover claims for any medical services arising from a pre-existing medical condition as defined in this policy.
3. General Health Exclusion: No claims under the policy will be paid where the Insured:
 - A. is traveling against the advice of a physician; or
 - B. is receiving or on a waiting list for treatment or awaiting the results of medical tests or investigations for medical treatment declared by a physician; or
 - C. is traveling for the purpose of obtaining treatment; or
 - D. has received a terminal prognosis for a medical condition.

Repatriation

The Insurer reserve the right to repatriate when in the opinion of the doctor in attendance and the Insurers' Medical Advisors, the insured is fit to travel.

Policy Limit and Excesses

This policy has specific limits on the amount the Insurers will pay.

All claims will be subject to an excess. This means that the Insurers will not be liable for the first part of the claim. The amount of the excess has to be paid by the Insured.

Eligibility

This policy is valid for residents of the kingdom of Nepal who are 70 years and under at inception.

Geographical Area

Area 1: **Worldwide including** USA and CANADA

Area 2: **Worldwide excluding** USA and CANADA

Area 3: **Asian Countries** (Thailand, Malaysia, Singapore, Philippines, North Korea, South Korea, Indonesia, China including Hong Kong & Taiwan, Japan, Laos, Cambodia, Vietnam, Myanmar, Macao, Mongolia, Timor and Letse)

Area 4: **SAARC Countries** (India, Bangladesh, Maldives, Bhutan, Sri Lanka, Pakistan & Afghanistan)

Selected Plan

Plan A: **Medical Expenses + Personal Accident Cover**

(A - C of Schedule of Cover)

Plan B: **Package Cover** (Worldwide including / excluding USA and CANADA)

(A - N of Schedule of Cover)

Asian Countries

(A - I of Schedule of Cover)

SAARC Countries:

(A & B of Schedule of Cover)

Student Plan

(A & C of Schedule of Cover)

Schedule of Cover

- | | | |
|---|---|---------------------------------------|
| A : Personal Accident | B : Medical and Emergency Expenses | C : Hospital Ancillary Benefit |
| D : Loss of Checked Baggage | E : Delay of Checked Baggage | F : Loss of Passport |
| G : Personal Liability | H : Travel Delay | I : Hi-jack |
| J : Cancellation and Curtailment | K : Emergency Return Home following Death of close family member | |
| L : Catastrophe | M : Legal Expenses | |
| N : Repatriation of family member travelling with the participants | | |