



Klapton Act of Terror Protection Plan Application Form

Please verify the information in this document. If you wish to make any corrections or changes, please notify us immediately.

Applying for Klapton Act of Terror Protection Plan Cover
<p>Submitting this application form to us doesn't mean you are already covered. We need to approve your eligibility and agree to cover you. You should submit this application via your insurance agent or broker.</p> <p>Please ensure that all relevant sections of this form have been completed.</p> <p>If you have any queries when completing this form then please speak with your insurance agent or broker.</p> <p>Please complete this form in BLOCK CAPITALS and use a black pen.</p> <p>ALWAYS READ THE POLICY WORDING AND THE TABLE OF BENEFITS BEFORE APPLYING FOR KLAPTON ACT OF TERROR PROTECTION PLAN</p>

Your Policy Number												
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Your Broker/Agent Name												
The Date of You Want Your Cover to Commence												
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A. Your Personal Details				
Full Name			ID Number	
Address				
Telephone No.			Mobile No.	
Date of Birth		Email		
Tick Your Desired Plan Level	<input type="radio"/> Silver <input type="radio"/> Gold <input type="radio"/> Platinum			

The Details of Persons You Want Us to Cover								
#	Last Name	Forename	Sex	Date of Birth	ID/Passport No.	Related to you	Protection Amount	Annual Premium
1			M / F					
2			M / F					
3			M / F					
4			M / F					
5			M / F					
6			M / F					
Total Premium Due:								

B. Insured's Declaration	
<p>I authorise any medical practitioner, or any other person(s) concerned with providing healthcare, to provide Klapton Protection Plan with any information that may be relevant to this Protection Plan Cover.</p> <p>If submitting any information on behalf of another person covered by my policy, I also confirm that I am doing so with their knowledge and permission.</p> <p>I declare the information shown on this form and any accompanying documentation is true and complete.</p>	
Applicant's Signature	Date



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C. Klapton Act of Terror Protection Plan Details

Klapton Act of Terror Protection Plan is an insurance scheme structured to provide you and your family with financial compensation in the event you or any of your listed family members is bodily injured as a result of act of terror.

Klapton will pay you (or your beneficiaries) if you or any insured person is bodily injured as a result of act of terror the Protection Amount in the event of death of an insured person, **or** 120 monthly payments of 1% of the Protection Amount in the event of permanent and total disability of an insured person.

If you or any insured person is bodily injured as a result of act of terror, and is temporarily hospitalized, Klapton will pay you (or your beneficiaries) for each month or part thereof of hospitalization, 1% of the Protection Amount, up to 120 months.

Applicant's Signature		Date	
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D. Klapton Act of Terror Protection Plan Premium Charge and Protection Amount

Klapton Act of Terror Protection Plan premium rate is only 0.1% of the elected Protection Amount ("sum insured") per year.

That means that if you want to take Protection Amount of 100,000 – the annual premium will be only 100.

The premium is charged for each listed person separately.

Your cover will become effective only after you have made your premium payment in full.

You can choose the Protection Amount for each listed insured from 25,000 and up to 1,000,000 per person.

Applicant's Signature		Date	
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