



HOME INSURANCE APPLICATION FORM

Currency : VND

Policy Number :

INSURED'S INFORMATION

Name: Mr/Ms Email:

Contact Address: Home Tel / Mobile:

Address of Residence: Year(s) of use:

Beneficiary

Type of Residence: Apartment House Material of Roof: Reinforced Concrete Steel Brick

Period of Insurance: From / / To / / (dd/mm/yy) Noon to Noon, Vietnam Time

COVERAGE

Basic Coverage: Fire Insurance

1. Fire; Lightning; 2. Explosion; 3. Aircraft; 4. Escape of water from tank; 5. Theft by forcible and violent breaking; 6. Impact to the buildings by any road-vehicle, horse or cattle not belonging to nor under the control of the insured; 7. Earthquake or volcanic eruption; 8. Hurricane, cyclone, typhoon, or windstorm; 9. Flood, including overflow of sea water; 10. Temporary Rent Compensation, Aggregate Limit: VND 50,000,000; 11. Fire Brigade Charge, Aggregate Limit: VND 50,000,000 (included in total Sum insured); 12. Fire Extinguishing and Other Costs; Aggregate Limit: VND 50,000,000 (included in total Sum insured); 13. Removal of Debris, Aggregate Limit: VND 50,000,000 (included in total Sum insured); 14. First Loss Basis (for contents only)

Insured Items / Sum Insured (Including Contents)	Sub Total Net Premium (1)
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Building and Contents (including Contents, Sum Insured of Contents: 30% of Sum Insured of Building, maximum: VND 1,000,000,000)	1. For the loss which results from Theft, the compensation limit per contents item is VND 30,000,000; Event Limit: VND 100,000,000; Aggregate Limit: VND 200,000,000. 2. If any covered loss happens to any portable electronic products, including but not limit to Laptop, Mobile phone, Video game machine, Camera, Video Camera, CD Player, I Pod, etc., the rule of calculating indemnity amount is as followed; Year of Use less than 1 year (including), Indemnity Amount = Purchased price * 50%; Year of Use between 1~2 years (including), Indemnity Amount = Purchased price * 25%; Year of Use over 2 years, No Indemnity Amount 3. Deductible: for Contents: 2,000,000 / per Event	Sum Insured of Building x 0.08%
VND 0		VND 0

Additional Coverage: 1. Personal Accident Insurance

Sum Insured	<input type="checkbox"/> Opt 1	<input type="checkbox"/> Opt 2	<input type="checkbox"/> Opt 1			Sub Total Net Premium (2)
Accidental Death and Permannant Disablemet	VND 100,000,000	VND 300,000,000	VND 500,000,000	Number of The Insured:	0	VND 0
Sum Insured / Medical Expense	VND 10,000,000	VND 30,000,000	VND 50,000,000			
Premium / per person	VND 150,000	VND 450,000	VND 750,000			

No.	Name	ID (Passport) No.	Date of Birth dd/mm/yy	Occupation	Job Description
1					
2					
3					
4					
5					



Additional Coverage: 2. Third Party Liability Insurance

against:

- 1 All sums which the Insured becomes legally liable to pay as compensation in respect of
 - 1.1 accidental bodily injuries to any third party person,
 - 1.2 accidental loss of or damage to property of third party
- 2 All costs and expenses of litigation (included in the Limit of Liability on Policy Schedule)

Sum Insured	<input type="checkbox"/> Opt 1	<input type="checkbox"/> Opt 2	<input type="checkbox"/> Opt 3	Deductible: for Property Damage only, VND 3,000,000 / per Event	Sub Total Net Premium (3)
Limit of Liability (C.S.L.)	VND 500,000,000	VND 1,000,000,000	VND 2,000,000,000		VND 0
Premium for Liability	VND 400,000	VND 800,000	VND 1,400,000		

PREMIUM

Total Net Premium (4)	(1)+(2)+(3) =	VND 0	*Please note the minimum premium for one policy is VND 200,000 *No VAT for Personal Accident Insurance
VAT (5)	((1)+(3))*10% =	VND 0	
Total Gross Premium	(4)+(5) =	VND 0	

DECLARATION

*WE/I DO HEREBY DECLARE AND WARRANT that the answers/information given above in every respect are true and correct and we/I have not withheld any information likely to affect the acceptance of this Proposal and we/I agree that this Proposal & Declaration shall be the basis of the Contract between the Company and ourselves/myself and we/I further agree to accept the Company's Policy subject to the terms, exclusions and conditions to be expressed therein, endorsed thereon or attached thereto.

**The insured's apartment / house has no flood record (over 10 cm high from ground floor) for previous 3 years.

Signature of Insured

Date: / /

Please note: Fubon reserves the right to issue policy.
The columns below is for Fubon only

General Director	D. General Director	Director	Manager	Underwriter	Handler	Agent Code