



IMPORTANT INFORMATION FOR FILING APPLICATIONS

In order to provide for a smooth processing of your insurance application, we kindly ask you to observe and check the following points:

Completion of Application Documents
All information has been given completely and in block letters .
The instructions on legal rights have been signed.
The consent to the collection and use of health data has been signed.
The signatures of the applicant as well as of all persons of legal age to be insured have been made.
All information on payment modalities has been given and all required signatures have been made.
With respect to the insurance products EXPAT GERMANY, EXPAT PRIVATE Premium and EXPAT INFINITY, please note as follows:
EXPAT GERMANY: In the event that the person to be insured has, upon commencement of insurance coverage, already stayed in Germany for a period of more than 31 days, a health certificate or evidence supporting a German prior insurance must be submitted. At the time of application, the health certificate must not be older than 14 days.
EXPAT PRIVATE Premium: Information on the state of health must be submitted together with the application. As from an age of 50 years, a health certificate that must not be older than three months at the time of application is to be filed.
EXPAT INFINITY: Information on the state of health must be submitted together with the application. From the age of 60 years, a health certificate not older than three months at the time of application is also required.
Completion of the Health Certificate
The health certificate has been drawn up in a clearly legible manner in the German or English language and all necessary signatures of the examining physicians have been made.
Each individual question has been answered.
Questions answered with "yes" or questions indicating a diagnostic finding have been explained in more detail.
For the supplementary modules EXPAT GERMANY PLUS as well as for the product variants EXPAT INFINITY CLASSIC and EXPAT INFINITY PREMIUM a dental status has been prepared.

For the case that inpatient treatments (hospital stays) have taken place, the findings report and the discharge report have been attached to the application.

The name and the complete address of the treating primary physician have been indicated.

One more recommendation: If we have any further questions with respect to the information to be rendered by you we kindly ask you to answer them within the terms set forth by us so that your insurance coverage can commence on the desired date.

Thank you very much for your cooperation!