

# Expatriate Medical & Emergency Evacuation Insurance

## **Application Form**

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Please read the Important Information Section on page 3 before completing this form.

Please contact us if you would like a hard copy of the relevant insurance policy or a summary of cover provided by Chubb.

To be completed for each insured person, including accompanying spouse and dependant children where applicable (if insufficient spaces please attach additional sheets)

Name of Emplo	mployer:							
Name of Insured Employee:								
Address of Insu Employee:	red							
Telephone:								
Email Address:								
Section 2 - Employee Details								
		Full Name			Natio	onality	Date of Birth	
Insured Employ	/ee:							
Spouse:								
Children:	1.							
	2.							
	3.							
	4.							
Details of Insured Employee:								
Details of Expat	riate F	Posting:	From:		То:			
Country of Assignment:								

#### Section 2 - Insured Person's Personal/Medical Statement

Telephone:

Please note, pre-existing medical conditions (including pregnancy prior to cover inception) are automatically excluded from Policy coverage. All possibilities must be considered prior to departure. Please disclose you or any accompanying family members medical history as follows. Give details to "YES" answers here. Refer to question number and show name of Insured Person. Include name and address of Doctor or Hospital. Has the Insured Employee or accompanying spouse or Dependant child: ☐ Yes ☐ No 1. a) Had medical or surgical advice or treatment, or been confined to hospital during the past 5 years? ☐ Yes ☐ No b) Ever had abnormal blood pressure, ulcers, diabetes, tuberculosis, cancer, paralysis, arthritis or rheumatism, any disorders of the respiratory, genito-urinary, digestive or circulatory system or, of the back, spine, eyes or heart? ☐ Yes ☐ No c) Ever suff ered anxiety state, nervous exhaustion or breakdown, psychosis or any form of mental disorder, or any physical impairment or deformity? ☐ Yes ☐ No d) Taken prescribed medication during the past 12 months, or been advised to take or continue prescribed medication in the future? 2. Is any Insured Employee or accompanying Spouse or accompanying Dependant children: ☐ Yes ☐ No a) Pregnant ☐ Yes ☐ No b) Required to have a medical examination prior to leaving for overseas assignment c) On a waiting list for medical treatment ☐ Yes ☐ No Are there any activities connected with any Insured Person(s) occupation or leisure activities which may be considered ☐ Yes ☐ No hazardous or render him/her susceptible to injury or illness (eg. welding, bulldozer driving, football, scuba diving, climbing - mountaineering, motor-sport and the like)? My usual Doctor is: Dr. Address:

Have you held Health Insura	ance for the last 12 continuous	months in New Zealand?			☐Yes ☐No		
If you answered yes to above, please give full details of Insurance below:							
Insured Person	Insurer	Policy Number	Date Cover Commenced		Date Cover Cancelled		
Declaration							
<ul> <li>a) I/we have read and understood Chubb's Financial Strength Rating, Duty of Disclosure and Privacy Statement in this form;</li> <li>b) all information provided (and where applicable, previously provided) is true and correct and I/we have made a fair presentation of the risk, by disclosing all material matters which I/we know or ought to know or, failing that, by giving the insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to reveal material circumstances;</li> <li>c) I/we undertake to inform the insurer promptly in writing of any material alteration to the facts declared that occurs prior to completion of the contract of insurance.</li> </ul>							
igned							
Signed Name			Date				
			Date				
			Date				

In this section "We", "Our" and "Us" means Chubb Insurance New Zealand Limited (Chubb). "You" and "Your" refers to Our customers and prospective customers as well as those who use Our website.

#### **Duty of Disclosure**

### **Your Duty of Disclosure**

Before entering into a contract of insurance with Chubb, each prospective insured has a duty to disclose to Chubb information that is material to Chubb's decision whether to accept the insurance and, if so, on what terms. This includes material information about the insured, any other people and all property and risks insured under the policy. Information may be material whether or not a specific question is asked.

There is the same duty to disclose material information to Chubb before renewal, extension, variation or reinstatement of a contract of insurance with Chubb. You should also provide all material information when you make a claim or if circumstances change during the term of the contract of insurance.

It is important that each prospective insured understands all information provided in support of the application for insurance and that it is correct, as each prospective insured will be bound by the answers and by the information they have provided.

The duty of disclosure continues after the application for insurance has been completed up until the time the contract of insurance is entered into.

#### **Consequences of Non-Disclosure**

If an insured fails to comply with their duty of disclosure, Chubb may be entitled, without prejudice to its other rights, to reduce its liability under the contract in respect of a claim or refuse to pay the entire claim. Chubb may also have the right to avoid the contract from its beginning. This means the contract will be treated as if it never existed and no claims will be payable.

#### **Financial Strength Rating**

At the time of print, Chubb has an "AA-" insurer financial strength rating given by S&P Global Ratings. The rating scale is:

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AAA	BBB	CCC	SD or D		
Extremely Strong	Good	Very Weak	Selective default or default		
AA	BB	CC	R		
Very Strong	Marginal	Extremely Weak	Regulatory Action		
A	B		NR		
Strong	Weak		Not Rated		

The rating from 'AA' to 'CCC' may be modified by the addition of a plus (+) or minus (-) sign to show relative standings within the major rating categories. A full description of the rating scale is available on the S&P Global Ratings website.

Our rating is reviewed annually and may change from time to time, so please refer to Our website for Our latest financial strength rating.

#### Fair Insurance Code

We are a member of the Insurance Council of New Zealand (ICNZ) and a signatory to ICNZ's Fair Insurance Code (the Code). The Code and information about the Code is available at <a href="https://www.icnz.org.nz">www.icnz.org.nz</a> and on request.



#### **Privacy Statement**

This statement is a summary of Our privacy policy and provides an overview of how We collect, disclose and handle your personal information. Our privacy policy may change from time to time and where this occurs, the updated privacy policy will be posted on Our website.

Chubb is committed to protecting Your privacy. Chubb collects, uses and retains your personal information in accordance with the requirements of New Zealand's Privacy Act, as amended or replaced from time to time.

#### **Personal Information Handling Practices**

#### When do We collect your personal information?

Chubb collects Your personal information (which may include health information) from You when You interact with Us, including when you are applying for, changing or renewing an insurance policy with Us or when We are processing a claim, complaint or dispute. Chubb may also (and You authorise Chubb to) collect Your personal information from other parties such as brokers or service providers, as detailed in Our privacy policy.

#### Purpose of Collection

We collect and hold the information to offer products and services to You, including to assess applications for insurance, to provide and administer insurance products and services, and to handle any claim, complaint or dispute that may be made under a policy.

If You do not provide Us with this information, We may not be able to provide You or Your organisation with insurance or to respond to any claim, complaint or dispute, or offer other products and services to You or Your organisation.

Sometimes, We may also use Your personal information for Our marketing campaigns and research, to improve our services or in relation to new products, services or information that may be of interest to You.

#### Recipients of the Information and Disclosure

We may disclose the information We collect to third parties, including:

- contractors and contracted service providers engaged by Us to deliver Our services or carry out certain business activities on Our behalf (such as actuaries, loss adjusters, claims investigators, claims handlers, professional advisers including lawyers, doctors and other medical service providers, credit reference bureaus and call centres);
- · intermediaries and service providers engaged by You (such as current or previous brokers, travel agencies and airlines);
- other companies in the Chubb group;
- the policyholder (where the insured person is not the policyholder);
- insurance and reinsurance intermediaries, other insurers, Our reinsurers, marketing agencies; and
- government agencies or organisations (where we are required to by law or otherwise).

These third parties may be located outside New Zealand. In such circumstances We also take steps to ensure Your personal information remains adequately protected.

From time to time, We may use your personal information to send You offers or information regarding Our products that may be of interest to You. If You do not wish to receive such information, please contact Our Privacy Officer using the contact details provided below.

#### Rights of Access to, and Correction of, Information

If You would like to access a copy of Your personal information, or to correct or update Your personal information, want to withdraw Your consent to receiving offers of products or services from Us or persons We have an association with, please contact the Privacy Officer by posting correspondence to Chubb Insurance New Zealand Limited, PO Box 734, Auckland; telephoning: +64 (9) 3771459; or emailing <a href="mailto:Privacy.NZ@chubb.com">Privacy.NZ@chubb.com</a>.

#### How to Make a Complaint

If You have a complaint or would like more information about how We manage Your Personal Information, please review Our <u>Privacy Policy</u> for more details, or contact Our Privacy Officer at the details above.

You also have a right to address Your complaint directly to the Privacy Commissioner by telephoning 0800 803 909, emailing <a href="mailto:enquiries@privacy.org.nz">enquiries@privacy.org.nz</a> or using the online form available on the Privacy Commissioner's website at <a href="https://www.privacy.org.nz">www.privacy.org.nz</a>.

#### **About Chubb in New Zealand**

Chubb is the world's largest publicly traded property and casualty insurance company. With operations in 54 countries and territories, Chubb provides corporate and commercial property and casualty insurance, personal accident and supplemental health insurance, reinsurance and life insurance to a diverse group of clients. As an underwriting company, we assess, assume and manage risk with insight and discipline. We service and pay our claims fairly and promptly. The company is also defined by its extensive product and service offerings, broad distribution capabilities, exceptional financial strength and local operations globally. Parent company Chubb Limited is listed on the New York Stock Exchange (NYSE: CB) and is a component of the S&P 500 index. Chubb maintains executive offices in Zurich, New York, London, Paris and other locations, and employs approximately 33,000 people worldwide.

Chubb's operation in New Zealand (Chubb Insurance New Zealand Limited) offers corporate and commercial property & casualty, group personal accident and corporate travel insurance products. Chubb in NZ also serves individuals with a substantial home and contents portfolio to protect, and individuals purchasing travel and personal accident insurance. It leverages global expertise and local acumen to tailor solutions to mitigate risks for clients ranging from large multinational companies to local corporates and SMEs, with all product offerings transacted through brokers.

More information can be found at www.chubb.com/nz.

#### **Contact Us**

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Company No. 104656 Financial Services Provider No. 35924

Chubb. Insured.<sup>™</sup>