

Effective Date Maturity

 Insurance agent: **MAINLY HEALTH PLANS** Type of agent: **AGENCIA VINCULADA**
 Direct Debit *Form of Payment: Annual Half-yearly Quarterly

* You can pay in instalments using direct debit, providing the annual amount of your bill is no less than Euros 120 and the resulting instalments are over Euros 60.

IT REPLACES

 FORM OF TARIFF
 PAYMENT
POLICYHOLDER

 Surname(s), name National ID No./Tax ID No.
 Address Postcode
 City Province Telephone
 If you do not wish to pay by direct debit, enter the billing address
INSURED

 Surname(s), name National ID No./Tax ID No.
 Address Postcode
 City Province Telephone
RISK SITUATION

 Address Flat No. Postcode
 City Province
DIRECT DEBIT

 Organisation Office Control No. Account No.
BENEFICIARY

 Yes No Beneficiary Tax ID No.
ACTIVITY

 Activity

 The business activities object of the risk have been carried out for years. If another business activity is carried out, please provide details

 The premises cover m2. It has a capacity for up to people

CONSTRUCTION FEATURES OF THE BUILDING AND THE SITE
LOCATION
 Urban area Industrial area Uninhabited area

TRAFFIC
 Permanent Normal Limited None

LIGHTING
 Intense Normal Limited None

 The premises form part of a shopping centre Yes No If yes, does it face the street Yes No
OCCUPATION

- a. It occupies the whole building. If yes, please indicate type of roofing:
- b. It only occupies the ground floor
- c. It occupies the intermediate floor(s)

 If you answered yes to b. or c., please enter how the rest of the building is occupied:
OWNED OR LEASED
 Owner Leased Tenant

CONSTRUCTION

 Year in which the building was built: Year in which refurbishment work was carried out (if applicable)
Construction:

- a. With structure, walls and roof made of non-flammable materials
- b. With exterior walls and roof made of non-flammable materials and combustible supporting structure
- c. Other categories

 Are there any land-retaining walls independent from the building? Yes No Value of the walls:

