DECLARATION

IMPORTANT - DO NOT SIGN THIS DECLARATION BEFORE YOU HAVE READ AND UNDERSTOOD IT.

If this form is being completed by someone else on your behalf please ensure that details submitted accurately reflect what you have said.

By making a request for Insurance with Atlas Insurance PCC Limited (hereinafter "Atlas"), You and any other person/s whom You propose to insure (hereinafter "Others") accept the terms of this Statement. You herby warrant that you have presented this Declaration and the leaflet 'Information for Policyholders' to Others and have obtained their necessary explicit verbal consent.

You confirm that you have read or have had read to You the contents of the completed proposal form and agree that the above statements are, to the best of your knowledge and belief, correct and complete and will form the basis of the contract between You and Atlas. You are satisfied with the way this proposal has been completed and confirm that if this form has been completed on your behalf by a person (including but not limited to any employee, agent or tied insurance intermediary of Atlas), such person, for that purpose, shall be regarded as Your agent and not the agent of Atlas. You agree to read the policy and be bound by its conditions.

Data Protection Notice

Atlas is the controller of personal data held about You and Others under the terms of the Data Protection Act (hereinafter the "Act"). You and Others

- (a) the processing of any information by Atlas and/or by any other subsidiary companies of Atlas or Atlas Holdings Limited (hereinafter the "Group") which constitute personal data terms of the Act, insofar as such processing relates to (but not limited to) underwriting and administration of the insurance proposal and policy, handling and settling of claims, detecting and prevention of fraud and the keeping of statics;
- (b) the disclosure by the Group of personal data held by them to other insurers or to persons acting on their behalf and/or instructions, including (but not limited to) the Malta Insurance Association, insurance intermediaries, the Malta Association of Credit Management (MACM), the Malta Insurance Fraud Platform and other appointed experts, together with the Commissioner of Police and any public or private hospital or clinic, other healthcare provider of any kind or any person, body or authority authorized by law to receive personal data;
- (c) the abovementioned third parties, and other third parties legally entitled to communicate such data, disclosing relevant personal data to the Group and processing such data as described in para (a) above;
- (d) the Group informing You and Others of their products and services by any means You understand and have explained to Others that You or Others may inform Atlas in writing if You or Others do not wish to receive such information;
- (e) the recording of telephone calls for training, security and quality control purposes

You also confirm that You understand (and have explained to Others) that You have the right to submit a written and signed request for access to or rectification of data held by the Group and that You and Others are aware that the full details of our Data Protection Policy, updated from time to time, may be found on http://www.atlas.com.mt/Legal/Data_Protection.aspx

| Name | Date | | | | |
|-----------|------|--|--|--|--|
| | | | | | |
| Cignoturo | | | | | |



Head Office 47-50 Ta' Xbiex Seafront 23 43 53 63 insure@atlas.com.mt **Ta' Xbiex** Abate Rigord Street 21 322 600 Paola Regional Office 87-89 Valletta Road 21 668 669 paola@atlas.com.mt Birkirkara 1 Psaila Street 21 49 20 00 bkara@atlas.com.mt Bormla 55 Gavino Gulia Square 21 800 880 bormla@atlas.com.mt Luqa Skyparks Business Centre Malta International Airport 21 68 68 68 skyparks@atlas.com.mt Qormi Pavi Shopping Complex Manwel Dimech Street 21 444 010 qormi@atlas.com.mt Rabat Vjal il-Haddiem 21 450 555 rabat@atlas.com.mt

Atlas Insurance PCC Limited is a cell company authorised by the Malta Financial Services Authority to carry on general insurance business. The non-cellular assets of the company may be used to meet losses incurred by the cell in excess of their assets.

San Gwann Naxxar Road c/w Bernardette Street 21 380 020 sangwann@atlas.com.mt

St Paul's Bay 2 Toni Bajada Street 21 578 000 stpaulsbay@atlas.com.mt

Proposal Form

Atlas**HomePlan**



HomePlan Proposal Form

Details of Proposer

Name/s

Please would you complete in ink in BLOCK CAPITALS. If you require additional space use the space on the end of this application.

Non Disclosure Warning: Please note that it is your duty to disclose all facts likely to influence the acceptance of your proposal. Failure to do so may prejudice the settlement of any claim or invalidate your policy. Please mention such facts (even if not the subject of a question below) or if in doubt refer to us or to your insurance intermediary. It is recommended that you retain a copy of this proposal and any information supplied in connection with it for future reference. A photocopy will be supplied upon request

Please Note: This insurance does not come into force until we have accepted your proposal. You must inform us of any alteration in the risk in the meantime.

Important Note on Sums Insured: Do ensure that your sums insured adequately represent the rebuilding cost of your building and the current cost as new of your contents. Otherwise, in the event of a loss, you will be required to bear part of the loss yourself.

| 1st proposer ID Card No/Passport business or occupation | | | | | | n | | | | | | | | |
|--|--|---|--|---|--|---|---|-----------|------------|---------|---|---------|-------|--|
| 2nd proposer ID Car | d No/Passport | | | | | busir | ess or occupatio | on 📗 | | | | | | |
| Postal address (incl. | post code) | | | | | | | | | | | | | |
| | | | | | 1 | | | | | | | | | |
| Tel. Numbers | residence | | | | work | | | | cellular | | | | | |
| 1st Email address | | | | | | | | da | te of birt | h | | | | |
| 2nd Email address | | | | | | | | da | te of birt | h | | | | |
| Address of private rebe insured (including | | | | | | | | | | | | | | |
| (if garage does not d | communicate ple | ease specify a | ddress) | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Date from which co | ver is required | | | | | | to | | | | | | | |
| Buildings | | | | | | | | ls insur | ance re | quired? | | Yes | No | |
| | | | | | | | | | | | | | | |
| State rebuilding and the like, poo | | | | | | | orations, bounda | ary walls | i | | € | | | |
| | ls, patios, drives, should include the | tennis courts he current co | s, garages a | nd any | other out | buildings | | | i | | € | | | |
| and the like, poo The above value | ls, patios, drives, should include tl d satellite dishes. | tennis courts he current co | s, garages a est as new c | nd any | other out urniture (| buildings inclusive o | | | • | | € | | | |
| and the like, poo The above value and of aerials and | ls, patios, drives, should include tl d satellite dishes. | tennis courts he current co | s, garages a est as new c | nd any | other out urniture (| buildings inclusive o | | | | | € | | | |
| and the like, poo The above value and of aerials and 2. If any bank or eq 3. Is a copy of the p | ls, patios, drives, should include the d satellite dishes. uivalent has an in colicy required fo | tennis courts he current co nterest in the | s, garages a est as new c buildings e eses? | of fitted f | other out furniture (| buildings inclusive o | | | | | € | Yes _ |] No | |
| and the like, poo The above value and of aerials and 2. If any bank or eq | ls, patios, drives, should include the disatellite dishes. uivalent has an in- colicy required for the extend the policy | tennis courts he current co nterest in the r bank purpo | s, garages a est as new c buildings e eses? | of fitted f | other out furniture (| buildings inclusive o | | | | | € | Yes Yes | No No | |
| and the like, poo The above value and of aerials and 2. If any bank or eq 3. Is a copy of the p 4. Would you like to | ls, patios, drives, should include the disatellite dishes. uivalent has an in- colicy required for the extend the policy | tennis courts he current co nterest in the r bank purpo | s, garages a est as new c buildings e eses? | of fitted f | other out furniture (| buildings inclusive o | | es) | | quired? | | | ╡ | |
| and the like, poo The above value and of aerials and 2. If any bank or eq 3. Is a copy of the p 4. Would you like to (subject to under | Is, patios, drives, should include the dishes. Univalent has an incolicy required for extend the policy rewriting restriction cost as new of years. | tennis courts he current co nterest in the r bank purpo cy to cover a ons) our contents | s, garages a est as new c buildings e eses? ccidental d | nd any of fitted figive the amage t | other out | buildings inclusive of d address dings? | of fitted applianc | es) | | quired? | | Yes | No | |
| and the like, poo The above value and of aerials and 2. If any bank or eq 3. Is a copy of the p 4. Would you like to (subject to under Contents 1. State the current | Is, patios, drives, should include the dishes. uivalent has an involicy required for extend the policy writing restriction cost as new of yongs section (pleatot being insured). | tennis courts the current counterest in the r bank purpocy to cover a ons) our contents ase make dec | ost as new consists as new consists as new consists as new consists and consists are consistent and consists are c | nd any of fitted f give the amage t content | other out furniture (name and o the buil | buildings inclusive of d address dings? separately clothing a | of fitted appliance of under the and household li | es) | | quired? | | Yes | No | |

| | Description of items to be insured | Value € |
|----|------------------------------------|---------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

• The above value of contents should include household goods plus personal effects and all valuables (being jewellery and other articles of gold, silver or other precious

• The standard policy limit on any one valuable (unless individually specified) is €2,500. Kindly specify below any items which exceed this limit (valuations are required for

metals; watches; furs; pictures, paintings and other works of art; collections of stamps, coins and medals).

• The standard policy limit on valuables overall is one third of the above value of contents or €20,000 (which ever is the lower amount).

| Is the private residence protected by a well maintained burglar alarm system? If YES give details of installing contractor, date installed and if telephone-linked: | | | Yes N | 0 |
|--|----------------------|---------------------|----------------|------------|
| ii 123 give details of instaining contractor, date installed and it telephone-linked: | | | | |
| Is your jewellery (including any insured under Personal Belongings cover) kept in a | | | | |
| safe when not in use? | | | Yes N | o 🗌 |
| If YES, state make, model and year of manufacture: | | | | |
| | | | | |
| 4. Do you have iron bars or shutters on all your ground floor and basement windows/doors? | | | Yes N | |
| If NO, please give details: | | | 163 14 | о <u> </u> |
| | | | | |
| 5. Would you like to extend your cover to include accidental damage to your contents? | | | Yes N | o 🗌 |
| (subject to underwriting restrictions) | | | | |
| Personal Belongings | Is insura | ance required? | Yes N | o 🗌 |
| "All Risks" Cover on Valuables and Personal Effects (subject to underwriting restrictions) | | | | |
| Standard rates cover items in Malta and up to 15 consecutive days elsewhere in Europe. Tick | k appropriate column | to show if standard | | |
| cover is required or if cover on an unlimited worldwide basis is required. | | | | |
| Evidence of value is required for any single item worth €750 & over | | | | |
| Description of items to be insured | Standard Cover | Worldwide | Value € | |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| Unspecified | | | | |
| jewellery (being articles of gold silver or other precious metals and/or precious | | | | |
| stones intended for the ornamentation of the person or to be worn) and watches | | | | |
| (Maximum value per item €350) | | | | |
| | | Total € | | |
| Do you wish to include cover on unspecified Personal Effects* | | | Yes N | 0 |
| (subject to a limit of €700 and a sub limit of €300 any one article) | | | | <u> </u> |
| * Personal Effects include all clothes and articles of personal use but exclude Valuables | and Money. This exte | nsion however doe | es not include | sports |
| equipment (automatically insured under Contents Section), portable computers, mobile pl | | | | |
| hearing aids, musical instruments and contact lenses. | | | | |
| Personal Accident | Is insur | ance required? | Yes N | 0 |
| If YES complete relevant section of Supplementary Proposal | | | | |
| Caravan | le ineur | ance required? | Yes N | |
| If YES complete relevant section of Supplementary Proposal | is ilisure | ance requireu: | ies IV | |
| | | | | |
| Also complete the following | | | | |
| 1. Is the private residence: | | | | |
| a. in an area normally free from flooding and storm damage? | | | Yes N | 0 |
| b. surrounded by occupied private residences? | | | Yes N | 0 |
| c. occupied solely by you and only for residential purposes? | | | Yes N | 0 |
| d. regularly occupied at night including weekends? | | | Yes N | 0 |
| e. protected by doors and windows against wind, rain and other elements? | | | Yes N | 0 |
| f. complete in every respect including any building works or internal alterations? | | | Yes N | 0 |
| g. in a good state of repair? | | | Yes N | o 🗍 |
| h. built of brick, stone or concrete with stone, slate, tile, asphalt, metal or concrete roofs | ? | | Yes N | |

| f y | ou have answered No to any of questions 1a t | o 1h, please give details | | |
|------|--|-------------------------------|---------------------------|----------------|
| _ | , , | ., 3 | | |
|). · | The private residence is a: | | | |
| | a. flat/maisonette | terraced house | semi-detached house | detached house |
| | b. owner occupied | rented to you furnished | Rented to you unfurnished | other |
| | If you have ticked "other" please give details: | | | _ |
| 3. | s the private residence ever left unoccupied | | ve days? | Yes No |
| | If YES, state number of days for which policy | | | days |
| | u" means Yourself and other members of y During the last five years have you suffered lo | | | |
| | involving other persons in respect of events v | which you wish to insure? | | Yes No |
| | Has any insurer ever imposed special terms o in respect of the risks to be insured? | n you or declined your insura | ance at any time | Yes No |
| | Have you ever been subject to any declaratio with but not yet tried for any offence other the | | victed of or charged | Yes No |
| 7. | Do you store, manufacture or transport any h (fireworks) in or about the private residence? | | otechnic materials | Yes No |
| | Have you any other policies in force covering | any of the perils insured aga | inst? | |
| | If you have answered Yes to any of questions | 4 -7 please give details: | | |
| | | | | |
|). | If you have an Atlas motor, boat and/or health | n policy, state policy number | s/registration marks | |
| | | | | |
| | Space for additional information if required. | | | |
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