

Country Bankers Insurance Corporation
APPLICATION FORM

Name of Applicant:

Address:

Present Occupation:

Age:

Date of Birth:

Tel. No.:

Mobile No.:

Sex:

Civil Status:

Name of Spouse:

Other Beneficiaries	Relationship	Address	Date of Birth

Plan:

Coverage:

Period of Cover:

I declare that I am in good health and free from any physical infirmity or defect.

I hereby warrant the truth and correctness of the above statements. I agree that this proposal and warranty shall be the basis of the contract between me and COUNTRY BANKERS INSURANCE CORPORATION whose policy is subject to the terms and conditions thereof I will accept.

DATE

SIGNATURE



Since 1960
COUNTRY BANKERS
 INSURANCE CORPORATION

Tulong na
Maasahan
Personal Accident (PA)
Insurance



*Kapag Sigurado,
 Hindi Kabado.*

OTHER PRODUCT LINES

- FIRE
- MOTOR CAR
- MONEY, SECURITIES AND PAYROLL
- ENGINEERING LINES
- COMPREHENSIVE GENERAL LIABILITY
- BONDS
- MARINE

Country Bankers Centre

648 T. M. Kalaw Ave., Ermita, Manila Philippines 1000
 Phone: (632) 524-0621 to 23 (632) 524-1886
 (632) 526-7865 Fax: (632) 526-2898

www.countrybankers.com/CBLIC.CBIC

Personal Accident Insurance

PLANS AND PREMIUMS

ACCIDENTAL DEATH
AND PERMANENT
DISABLEMENT

ACCIDENTAL MEDICAL
REIMBURSEMENT

PREMIUM
(inclusive of taxes)

CLASSIC (INDIVIDUAL PLAN)

10,000.00	1,000.00	24.00
20,000.00	2,000.00	48.00
30,000.00	3,000.00	71.00
40,000.00	4,000.00	95.00
50,000.00	5,000.00	118.00
100,000.00	10,000.00	236.00
200,000.00	20,000.00	471.00
300,000.00	30,000.00	706.00
400,000.00	40,000.00	941.00
500,000.00	50,000.00	1,177.00

WORKERS (GROUP PLAN)

*OCCUPATIONAL CLASSIFICATION

		CLASS A	CLASS B
10,000.00	1,000.00	22.00	30.00
20,000.00	2,000.00	43.00	59.00
30,000.00	3,000.00	64.00	89.00
40,000.00	4,000.00	85.00	118.00
50,000.00	5,000.00	106.00	148.00
100,000.00	10,000.00	212.00	250.00
200,000.00	20,000.00	424.00	500.00
300,000.00	30,000.00	636.00	750.00
400,000.00	40,000.00	847.00	1,000.00
500,000.00	50,000.00	1,059.00	1,250.00

STUDENT (GROUP PLAN)

5,000.00	500.00	10.00
10,000.00	1,000.00	15.00
15,000.00	1,500.00	20.00
20,000.00	2,000.00	25.00
25,000.00	2,500.00	30.00
30,000.00	3,000.00	35.00
35,000.00	3,500.00	40.00
40,000.00	4,000.00	45.00
45,000.00	4,500.00	50.00
50,000.00	5,000.00	55.00

*OCCUPATIONAL CLASSIFICATION

CLASS A - Non-hazardous. E.G. Accountants, Bankers, Clerks, Office Managers, Teachers and other similar occupations

CLASS B - Semi-hazardous. E.G. Engineers, Foremen, Carpenters, Security Guards, Drivers, and other similar occupations

24-HOUR ALL-RISK ACCIDENT INSURANCE

Special Plan

COMPREHENSIVE FAMILY INSURANCE PLAN

PLAN	PRINCIPAL	SPOUSE	CHILD-REN (max. of 4)	PREMIUM (Inclusive of Taxes)
PLAN A ACCIDENTAL DEATH & PERMANENT DISABLEMENT	200,000.00	100,000.00	50,000.00	648.00
ACCIDENTAL MEDICAL REIMBURSEMENT	20,000.00	10,000.00	5,000.00	

PLAN B ACCIDENTAL DEATH & PERMANENT DISABLEMENT	100,000.00	50,000.00	25,000.00	324.00
ACCIDENTAL MEDICAL REIMBURSEMENT	10,000.00	5,000.00	2,500.00	

PLAN C ACCIDENTAL DEATH & PERMANENT DISABLEMENT	50,000.00	25,000.00	12,500.00	162.00
ACCIDENTAL MEDICAL REIMBURSEMENT	5,000.00	2,500.00	1,250.00	

PLAN D ACCIDENTAL DEATH & PERMANENT DISABLEMENT	25,000.00	12,500.00	6,250.00	81.00
ACCIDENTAL MEDICAL REIMBURSEMENT	2,500.00	1,250.00	625.00	

New!

CARD TYPE PA

	ACCIDENTAL DEATH AND PERMANENT DISABLEMENT	PREMIUM (Inclusive of Taxes)
BLUE	100,000.00	200.00
YELLOW	50,000.00	100.00
RED	25,000.00	50.00

Conditions and Exclusions set forth in the Policy