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Global Protection Plans

Occupational Questionnaire

Please complete in **BLOCK CAPITALS** using black ink, and return it to us by email, fax or post. You can find our contact details at the end of this form.

Details of applicant's occupation
Full name:
Plan number: Email:
1. Is your occupation 100% office-based? Yes No
2. Please describe your duties that are not office-based in detail:
3. How much of your time as a percentage do you spend carring out these duties that are not office-based?
4. Are you required to travel as part of your work? If so, by what means, how often, and to where?
4. Are you required to flaver as pair or your work? If so, by what means, now offers, and to where:
5. Is there any other relevant information you would like to provide?
Declaration
I declare that the above information is correct and accurate to the best of my knowledge.
Signed by applicant:

The Global Life plan is insured by Allianz Nederland Levensverzekering N.V., an EEA insurer registered in the Netherlands.

The Global Income Protection and the Global Accident plans are insured by Allianz Benelux N.V., an EEA insurer registered in the Netherlands.

William Russell Limited is the administrator of the Global Protection plan range, and is authorised and regulated by the Financial Conduct Authority, registration number 309314.

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