

## INDIVIDUAL LIFE INSURANCE

### CERTIFIED RESIDENTIAL ADDRESS

Please complete this form using black or blue ink. Write in **BLOCK LETTERS** and tick the relevant items. If your application is incomplete it might cause a delay. Kindly ensure that you submit a fully filled form together with the signed illustration. The proposed life assured and policy owner are required to disclose all information requested. Please retain a copy of this proposal form and other correspondences with us for your future reference.

**For best results, use Adobe Acrobat or a similar PDF processing application to fill out the form.**

#### 1. Policyholder Details

1. Full Name	<input type="text"/>	Mr. <input type="checkbox"/>	Ms. <input type="checkbox"/>	Mrs. <input type="checkbox"/>
2. Address in the UAE	Building: <input type="text"/>			
	Street: <input type="text"/>			
	P.O. Box: <input type="text"/>	City: <input type="text"/>	Country: <input type="text"/>	
	Telephone: <input type="text"/>			
3. Mobile	Building: <input type="text"/>			
	Street: <input type="text"/>			
	P.O. Box: <input type="text"/>	City: <input type="text"/>	Country: <input type="text"/>	
	Telephone: <input type="text"/>			
4. Address in the Home Country	Building: <input type="text"/>			
	Street: <input type="text"/>			
	P.O. Box: <input type="text"/>	City: <input type="text"/>	Country: <input type="text"/>	
	Telephone: <input type="text"/>			
5. Mobile	Telephone: <input type="text"/>			

#### 2. Sukoon's Data Privacy Notice and Data Subject's Consent

Sukoon Insurance PJSC (hereinafter referred to as "Sukoon") respects your privacy and is committed to protecting it. Sukoon abides by Federal UAE Data Protection regulations as is applicable to Sukoon within UAE. Each of the applicant(s), proposer(s), insured member(s), beneficiary(ies), insurance intermediary(ies), any person(s) contacting Sukoon for any purpose (altogether referred to as "Data Subject"/"you"/"your") hereby consents and authorises Sukoon Insurance PJSC ("Sukoon") to collect, use, store, maintain, transfer, disclose, Process, Data Subject's personal data (which includes but is not limited to personal identification data, personal sensitive data, personal health data as provided to and/or obtained by Sukoon) in accordance with Sukoon's data privacy policy as published on <https://www.sukoon.com/privacy-policy> ("Privacy Policy"), which each Data Subject confirms to have been notified and having read, consented to the same. The Data Subject confirms to have notified all other relevant Data Subject(s) about Sukoon's Privacy Policy and to have obtained their relevant consents prior to transferring any of their personal data to Sukoon."

#### 3. Participant Declaration

I hereby certify that I reside at the address mentioned above.

Name

Date

Signature