



EFS





Insurance application form

The following sections must be completed and signed as follows:

- Sections 1-11 to be completed by the Policyholder
 - Sections 12-15 to be completed by the Next of kin/Policyholder
- Please confirm the insurance package you have selected under the 'Insurance Preferences' heading.

All parties involved in the contract must sign the general disclosures. Additionally, the Policyholder should initial each page. If the Policyholder or Premium Payer is a company, trust, or non-natural entity, please make sure that the relevant addendums are enclosed when submitting the application.

Section 1-11. Policyholder Information

"I hereby complete this insurance application form for EFS."

Surname of Policyholder	<input type="text"/>
First name of Policyholder	<input type="text"/>
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
ID/Passport/Birth Entry No:	<input type="text"/>
Date of Birth	<input type="text"/>
Email	<input type="text"/>
Cellphone No	<input type="text"/>
Nationality	<input type="text"/>
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
Residential Address	<input type="text"/>
Mailing Address (if different)	<input type="text"/>





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Sections 12-15. Next of Kin Information

Surname

First name

Gender

☐

Male

☐

Female

Date of Birth

ID / Passport / Birth Entry No:

Packages

LIST	Annual	YEAR 2	YEAR 3
Standard	R 100	R 20	R 80
Exclusive Bundle	R 120	R 20	R 100
Prestige Package	R 240	R 40	R 200
Luxury Access	R 340	R 40	R 300
Prime Portfolio	R 460	R 60	R 400
Gold Membership	R 560	R 60	R 500
VIP Collection	R 670	R 70	R 600
Signature Series	R 780	R 80	R 700
Platinum Package	R 1 000	R 100	R 900





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First-Class Suite	R 1 100	R 100	R 1 000
Supreme Selection	R 1 330	R 130	R 1 200
Premium	R 1 550	R 150	R 1400
Diamond Suite	R 1 750	R 150	R 1 600
Ultimate Experience	R 2 000	R 200	R 1 800
Elite Suite	R 2 200	R 200	R 2 000
Premium First Class	R 2 500	R 300	R 2 200
Premium Selection	R 2 800	R 300	R 2 500
Premium Diamond	R 3 000	R 300	R 2 800
Premium Star	R 4 000	R 500	R 3 500
Premium Suite	R 5 000	R 500	R 4 500

Who is allowed to join (from which age)?

Being that as it may be, it is of paramount importance to note that EFS Insurance doesn't only cover incoming/operating businesses, small companies, and products, but it also ensures your money/ savings, including newborn babies (we cover the financial savings up to when the child has grown up to be an adult and he/she is liable to claim the money)

Summary

"When it comes to the packages, the Annual Payment refers to the amount that you need to pay, while the Fee is the money that is deducted from the Annual Payment. The Total Net is the amount that is left after the deduction, and it is stored in your account.

Promo

Our promotions are available for clients who have been with us for five years or more. For clients who have been with us for five to eight years and have never made a claim, we offer a 2% increase on their withdrawal. For clients who have been with us for ten years or more and have never made a claim, we offer a 5% increase on their withdrawal





EES

Insurance Preferences

Type of Insurance Coverage Desired: ☐ My Money ☐ Starting Business ☐ Small Business ☐ Small Products

Package

Package Price

We recommend that the beneficiary be the same person as your next of kin for security purposes. For more information, please contact us.

Beneficiary Information:

Full Name

Relationship to Applicant

ID / Passport / Birth Entry No:

Additional Information:

How did you hear about our insurance company?

Have you previously held insurance coverage?

☐

YES

☐

NO

If yes, please provide details:

Declaration:

"I confirm that all the information provided in this application form is true and accurate to the best of my knowledge. I understand that any misrepresentation or omission may lead to the denial of coverage or cancellation of my policy."

Date of Registration:

Signature: _____

