## Helsana

## Quotation order form for compulsory/ supplementary accident insurance (UVG/UVG-Z)

Customer's data	Company	
Telephone	Street, no.	
Legal form	Postcode, town	
Founding year	Sector/activity	
Under collective INO employment contract	] Yes, name of association	
Occupational pension plan with	SwissLife Swisscanto	
Contract data of former insu	r	
Former insurer INO (UVG/UVG-Z)	☐ Yes, insurance company	/
	Policy no. /	
	Reason for annulment UVG with SUVA	
End of contract	Date	
Contract data UVG/UVG-Z		
Commencement of contract with Helsana	Date	
Premium calculation	Risk no. SUVA final premium rates % occupational accident non occupational accident	
Compulsory insurance		
Insurance for	Number of men (M) Salary	sum M CHF
occupational accidents (UVG salary level <= CHF 148,200)	Number of women (W) Salary	sum W CHF
Insurance for	Number of men (M) Salary	sum M CHF
non-occupational accidents (only salaries > 8 hrs./week)	Number of women (W) Salary	sum W CHF
Surplus salary level (> CHF 148,200)	•	sum M CHF sum W CHF
Voluntary insurance	Ear	ning CHF
Surname, first name	Date of birth Company owner Mer	n Women
	Yes 🗌 No	
	Yes No	

Please see next page

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Supplementary UVG insura	nce	
Treatment costs	Private ward	Semi-private ward
Daily allowance	100% 1 <sup>st</sup> and 2 <sup>nd</sup> day and	☐ 10% days waiting period or ☐ 20% days waiting period
Disability lump sum	times the year	ly earning (1–6 times) 🔲 100% 🗌 225% 🔲 350%
Death lump sum	times the yearly earning (1-6 times the yearly earning)	
Special risk		□ No
Surplus salary level		
Daily allowance	80% days waiting	period 🗍 90% days waiting period 🗍 100% days waiting period
Disability lump sum	times the yearly earning (1–6 times) $\Box$ 100% $\Box$ 225% $\Box$ 350%	
Disability pension	Until AHV age	According to UVG (lifetime)
Death lump sum	times the yearly earning (1-6 times the yearly earning)	
Survivors' pension	Until AHV age	According to UVG (lifetime)
Comments		
Person ordering the quotation	Name	Company
	Telephone	Email
<b>Receiving centre</b> (General Agency, email address of General Agency, fax no.)		