



MOTOR INSURANCE FOR THE ARABIAN PENINSULA

The insurance coverage is valid in Bahrain, Yemen, Qatar, Kuwait, Oman, Saudi-Arabia and the United Arab Emirates. You can choose one of the following:

Coverage 1:

- Liability insurance with a limit of € 500.000 for each claim.
- Some countries demand a local insurance coverage. The insured amount might be very low. In this case, our coverage exceeds the local policy up to a limit of € 500.000.

Coverage 2:

- Liability insurance incl. full comprehensive and partial comprehensive coverage with a deductible of € 2.500 for each claim.
- Only valid for vehicles not older than 5 years (not possible for motorcycles).

Please complete the attached application form, sign it and send it back to us.
For all insurance premiums incl. taxes, please see the price list following below.

INFORMATION

- Please transfer the insurance premium to the following account at HypoVereinsbank:
IBAN: DE28 2003 0000 0000 4291 34, SWIFT/BIC: HYVEDEMM300
- For payment by Master Card or by Visa Card, please fill in the following credit card authorisation form and send it back to us by fax or by post only (**not by e-mail**).
- Complementary travel insurances can also be provided by us. If required, please ask for more information.



APPLICATION FOR A MOTOR INSURANCE – ARABIAN PENINSULA



Form may be completed
on a computer

Applicant

Name First Name

Address

Zip, City Country

Phone E-Mail

Date of Birth

Description of the vehicle

Make Year

Type Plate Number Country of Registration

Vehicle ID No. Actual Value in €

Declared value incl. supplementary equipment (in €) if applicable. This value will be the basis for your claim.

Desired Coverage

Third Party Liability

Bodily Injury € 500.000

Property Damage € 500.000

Financial Damage € 50.000

(each claim)

Yes No

Comprehensive incl. fire and theft (not for motorcycles)

Deductible € 2.500 each claim

Valid in following countries _____

Period from _____ to _____ for _____ months

Date Signature

The conditions „Allgemeine Kraftfahrt Versicherungsbedingungen“ (AKB) of the AXA Versicherung AG as amended from time to time shall apply.

AXA Versicherung AG/TourInsure GmbH, Herrengraben 5, 20459 Hamburg, Tel.: +49 (0)40 / 251 721 50, Fax: +49 (0)40 / 251 721 21

E-Mail: Service@Tourinsure.de, Internet: www.TourInsure.de





PREMIUMS FOR MOTOR INSURANCE – ARABIAN PENINSULA

valid for customs and foreign registrations – cars, caravans, motorcycles
(all premiums in € including tax)

Third-party liability insurance month

Period	1	2	3	4	5	6	7	8	9	10	11+12
Premium	208	297	386	475	564	653	742	831	920	1.009	1.187
Trailer	73	73	73	113	113	113	131	131	131	155	155

Total coverage € 500.000

Comprehensive and collision including third-party liability insurance (not for motorcycles)

Current value in €	12.500	1.131	1.690	2.005	2.332	2.647	2.962	3.176	3.491	3.806	4.686	5.037
25.000	1.541	2.410	2.725	3.361	3.676	3.991	4.312	4.615	4.925	6.412	6.804	
37.500	1.952	3.129	3.445	4.384	4.539	4.842	5.544	5.847	6.156	8.084	8.482	
50.000	2.362	3.843	4.010	5.217	5.521	5.830	6.776	7.085	7.388	9.125	9.499	
75.000	2.981	4.742	5.045	7.484	7.788	8.097	9.608	9.917	10.226	11.469	11.850	

Insurance against theft and partially comprehensive including third-party liability insurance (not for motorcycles)

Current value in €	12.500	827	1.225	1.463	1.713	1.957	2.194	2.367	2.604	2.842	3.461	3.752
25.000	1.101	1.707	1.945	2.397	2.641	2.879	3.122	3.354	3.592	4.609	4.936	
37.500	1.374	2.183	2.421	3.081	3.212	3.444	3.943	4.175	4.413	5.728	6.048	
50.000	1.648	2.665	2.802	3.635	3.872	4.104	4.764	4.996	5.234	6.418	6.727	
75.000	2.059	3.260	3.492	5.146	5.384	5.616	6.657	6.888	7.120	7.983	8.298	

Only valid for drivers aged between 25 and 65 years.

Surcharge for drivers at the age of 21 to 24 years and for sportscars is 25%.

Persons over 65 years have to submit a medical report declaring their fitness to drive (no surcharge).

Deductible € 2.500 for each comprehensive and collision and theft claim.



CREDIT CARD AUTHORIZATION FORM



Form may be completed
on a computer

Please complete this form and return it by post or by fax to:

TourInsure Agentur für
Touristenversicherungen GmbH
Herrengaben 5
D-20459 Hamburg

Fax: +49 (0)40 / 251 721 21

Cardholder details (Please print)

Name

First Name

Address

ZIP, City

Country

Phone

E-Mail

Total amount in € _____ plus fee

Credit Card (please tick where applicable)

Master

Visa

Credit Card number

exp. date (4 digit)

/

Security code (3 or 4 digits, above signature)

I authorize TourInsure Agentur für Touristenversicherungen GmbH to charge my credit card with the a. m. amount.

Date

Signature

Please do not send by e-mail!



TOURINSURE AGENTUR FÜR
TOURISTENVERSICHERUNGEN GMBH

OUR PARTNERS

