

Wedding

YOUR WORLD | OUR COVER



INSURANCE PROPOSAL FORM

ALL QUESTIONS MUST BE FULLY ANSWERED

1. PROPOSER DETAILS (PLEASE USE CAPITAL LETTERS)

Title:	Name & Surname of Proposers:
Postal Address:	

2. PLEASE TICK AS APPROPRIATE

Bride <input type="checkbox"/>	Groom <input type="checkbox"/>	Partner <input type="checkbox"/>	Name:
ID Card No.:	Passport No.:		
Mobile No.:	E-mail:		
Have you ever been convicted or are you currently being prosecuted for any criminal offence? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Bride <input type="checkbox"/>	Groom <input type="checkbox"/>	Partner <input type="checkbox"/>	Name:
ID Card No.:	Passport No.:		
Mobile No.:	E-mail:		
Have you ever been convicted or are you currently being prosecuted for any criminal offence? Yes <input type="checkbox"/> No <input type="checkbox"/>			

3. CEREMONY

Date of Wedding:	Wedding Venue:
Date of Wedding Reception:	Wedding Reception Venue:
Number of Guests:	Is the wedding ceremony being held indoors or outdoors?
Is the wedding reception being held indoors or outdoors?	
If outdoors, is there any provision made for a waterproof cover?	
Are you aware of any circumstances which may give rise to a loss?	

4. COVER SELECTED

Bronze Silver Gold Platinum Sapphire Ruby Diamond

5. ADDITIONAL COVER SELECTED

Optional Public Liability Extension:	Required / Not Required					
If required, please choose number of guests:						
Up to 250 Guests <input type="checkbox"/>	Up to 500 Guests <input type="checkbox"/>	Up to 750 Guests <input type="checkbox"/>	Up to 1,000 Guests <input type="checkbox"/>	Over 1,000 Guests <input type="checkbox"/>		
Optional Marquee Extension:	Required / Not Required					
If required, please choose Limit:						
Up to €5,000 <input type="checkbox"/>	Up to €10,000 <input type="checkbox"/>	Up to €15,000 <input type="checkbox"/>	Up to €25,000 <input type="checkbox"/>	Up to €30,000 <input type="checkbox"/>	Up to €35,000 <input type="checkbox"/>	Up to €40,000 <input type="checkbox"/>
Optional Wedding Abroad Extension:	Required / Not Required					
If required, please complete following questions:	Date of departure from Malta:					
Where is the wedding going to be held?	Date of return to Malta:					

Total Premium: €	Fee: €
Document Duty: €	Total: €

6. IMPORTANT

You should not sign this Proposal Form and its statements or declarations before you have read and understood them. If this document is being completed by someone else on your behalf please ensure that the details on it accurately reflect what you have said.

APPLICABLE LAW

Unless both you and we agree otherwise this contract shall be subject to Maltese Law and to the exclusive jurisdiction of the Maltese courts.

INSOLVENCY

In the event that we become insolvent and unable to meet our obligations under this contract, limited compensation may be available to you under the Protection and Compensation Fund Regulations, 2003.

DATA PROTECTION NOTICE

The controller of your data is Citadel Insurance p.l.c. and its subsidiaries ("the Company"). Should you have any queries, you may contact us by:

Telephone: (+356) 2557 9000 email: dpadmin@citadelplc.com

Post: Casa Borgo, 26, Market Street, Floriana FRN 1082

If you wish to address the Company's Data Protection Officer directly, you may do so by:

Telephone: (+356) 2759 5000 email: dpo@citadelplc.com

Post: DPO, 170 Pater House, Psaila Street, B'Kara BKR 9077

PURPOSES AND LEGAL BASES FOR PROCESSING

The personal data provided about you on this proposal form or subsequently, whether in writing or orally, is necessary to perform the contract of insurance and/or to take steps at your request prior to entering into the contract. The Company may process such data to assess risk, underwrite and issue present and future contracts of insurance, collect premiums, assess and respond to your queries, and transfer data to and receive data from other insurance and reinsurance companies to underwrite your contract of insurance. The Company may process your data to carry out due diligence, where necessary, and to prevent, detect, suppress and/or report insurance fraud or any other criminal activity, as required by law. The Company may also process your data to establish, exercise and/or defend itself in legal action, to carry out research and compile statistics, perform actuarial science, and to protect its data systems, thus protecting its legitimate interests.

RECIPIENTS OF THE DATA

Your personal data will be received by the Company, or an intermediary on the Company's behalf, and it may be disclosed or shared, **only as is strictly necessary in accordance with the purposes outlined above**, with the Company's employees, subsidiaries, associates, intermediaries, joint controllers, the Company's external actuaries, consultants, legal advisors, auditors, risk assessors, loss adjusters and surveyors, repairers, healthcare and other medical institutions and professionals, banks, credit referencing agencies, risk intelligence agencies, vehicle history and valuation databases, the Malta Insurance Association and other insurance and reinsurance companies, other professionals, and public, legal and/or judicial authorities. The Company may also disclose your data to third parties if it is called upon to do so by a competent authority, or by a Court or tribunal, only to the extent required and allowed by law. The transfers of personal data to third parties located outside the EEA and countries of equivalent level of data protection on a regular basis will only be carried out under appropriate safeguards or in emergency cases using a derogation as specified in the GDPR.

DATA RECEIVED FROM OTHER SOURCES

The Company may receive personal data about you, such as identifying information, information regarding your insurance history, financial details, and medical information, from third party sources, such as the recipients listed above or from others, such as the ETARS traffic accident database and public government websites. The data is collected for the purposes outlined above. The Company may also record telephone conversations for training, security and quality control purposes. CCTV cameras are in use throughout the Company's premises.

RETENTION PERIOD

The Company makes every effort to store personal data only for as long as it is necessary for the purposes outlined above. If the Company does not provide you a quote on your proposal, or provides you a quote which you do not accept, the Company will store the data provided by you for five (5) years. If a policy is issued, further information on retention periods will be provided in your policy document.

YOU HAVE THE RIGHT TO

- Acquire access to your data, including confirmation from the controller as to whether data about you is being processed and to receive further information about that processing;
- Amend inaccurate personal data;
- Request the erasure of data processed about you, on the basis of certain grounds, such as where the data is no longer necessary for the purposes for which it was collected, and is no longer necessary for regulatory compliance or where consent for processing that requires consent has been withdrawn, among other grounds;
- Request the data controller to restrict its processing activities on your data, on the basis of certain grounds, such as where the accuracy of the data is contested;
- Receive the personal data provided by you in a structured, commonly used and machine-readable format or to request that such data be transferred in such format to another data controller;
- Withdraw your consent to processing that is based on your consent, such as direct marketing;
- Lodge a complaint with the competent supervisory authority in Malta (IDPC), which can be made on their website <https://idpc.org.mt>;
- Object to processing that is carried out for the legitimate interests of the controller, by reference to your specific situation. You may, at all times, object to direct marketing.

Should you wish to exercise any of your rights, you may do so by contacting us, our DPO, or by visiting our website.

IMPORTANT INFORMATION

The information that you provide is necessary for the performance of your contract of insurance, or to take steps at your request prior to entering into a contract. Failure to provide the Company with information as necessary throughout the lifetime of your policy might render the Company unable to fulfil its obligations under your contract.

The Company engages in insurance industry standard profiling, wherein the assessment of risk is partially made by automated means. However, all final decisions which produce any legal effects on data subjects, including without limitation, the decision on whether to underwrite a risk and issue a contract of insurance, are taken with human intervention.

If you are acquiring a quote or an insurance policy through an insurance broker, such broker may be considered a joint controller.

If a policy is issued, a more detailed Data Protection Notice will be provided in your policy document. It is also available on our website.

DECLARATION

I/We declare that the information given in the Proposal Form is to the best of my/our knowledge true, accurate and complete. Further, I/We agree that if my/ours answers are not in my/our handwriting and/or have been written by any other person on my/our behalf, then such person shall for that purpose be regarded as my/our agent. I/We further declare that no material fact has been withheld and I/We understand that failure to disclose a material fact may result in the contract being declared void and that a claim under the policy may not be paid. **A material fact is one which is likely to influence Citadel insurance p.l.c. in the best assessment and acceptance of this proposal.** The Proposal Form and Declaration will be considered the basis of the contract and will form part of the Policy. I/We understand that the cover under the policy will not be operative until proposal Form has been accepted by Citadel Insurance p.l.c. the relative premium has been paid and received by Citadel insurance p.l.c. By signing this form, you confirm that you have brought this Data Protection Notice to the attention of all other persons specified in this form.

IMPORTANT NOTES

1. You are advised to keep a copy of this Proposal Form for your records.
2. Only the Policy Document provides full details of what is and what is not covered. A specimen policy is available on request.
3. We will provide you with a copy of the completed Proposal Form whenever you require. Furthermore, we will undertake not to raise an issue under your Proposal Form unless we first provide you with a copy of the Proposal Form which you had submitted to us.
4. The Company is bound by the professional Secrecy Act, 1994 with respect to information furnished by you to Citadel insurance p.l.c. in connection with this insurance proposal. However, the Insurance Business Act, 1998 provides for the exchange of such information with any other insurance company, insurance intermediary and/or the Police solely for the purpose of preventing, detecting or suppressing insurance fraud.

I/We have read and agreed to the Data Protection Notice, the Declaration, the Important Notes and any other information relating to my/our rights. If there is more than one proposer, then all persons must sign.

KEEP ME POSTED

Do you wish to keep yourself updated with our products?

Yes

No

Please specify the format in which you prefer your copy of the Policy Document

Electronic

Hard Copy

Name and Surname of Proposer(s) (BLOCK LETTERS)

Signature of Proposer(s)

Date:

ID Card: _____

Name and Surname of Intermediary

MAKING YOURSELF HEARD

We are committed to providing a high standard of service, but, if this does not meet your expectations in some way, you can make yourself heard by contacting us so that we can address your concerns promptly. This procedure can also be found on our website www.citadelplc.com and on the 'Important Information' leaflet provided to you at pre-contractual stage.

Kindly following the below procedure to contact us about your insurance policy service expectations:

Step 1:

Please address your complaint to:

The Head of the General Underwriting Department
Citadel Insurance plc
26 Casa Borgo, Market Street
Floriana FRN1082
Email: info@citadelplc.com
Tel: (+356) 25579000

Step 2:

Our aim is to always resolve your complaint promptly. Should you still not be satisfied with our initial reply, you may proceed to reach out to our Compliance Officer by writing to the Company's registered address mentioned above or to the following email address: ci-complaints@citadelplc.com.

On our part, We will:

- Acknowledge your complaint promptly;
- Provide a response without any unnecessary delay or, at least, by not later than fifteen working days from when the complaint was registered;
- When a reply cannot be provided within fifteen working days, We will inform you about the causes of the delay and give you an indication of when the investigation is likely to be completed.

Step 3:

If we have not been able to address your complaint after receiving our final written response, you may write to:

The Office of the Arbiter for Financial Services
N/S in Regional Road
Msida MSD 1920
Website: <https://www.financialarbiter.org.mt/>

or any other Alternative Dispute Resolution (ADR) scheme such as arbitration and the Consumer Claims Tribunal, enclosing a copy of our correspondence and decision.

Our commitment is to value your feedback and strive to improve our services through every complaint we receive.

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Citadel Insurance p.l.c. *Branches:*

Birkirkara | 2148 0545

Haż-Żebbuġ | 2146 4873

In-Naxxar | 2141 9198

Il-Mosta | 2143 8880

Iż-Żejtun | 2180 7779

Paola | 2180 6247

Ta' Xbiex | 2133 6911

Il-Mellieħa | 2152 5232

Victoria, Gozo | 2156 6660



Floriana | 2557 9000 - Freephone | 800 72322



info@citadelplc.com



citadelplc.com

Citadel Insurance p.l.c. • Casa Borgo • 26 Market Street • Floriana FRN 1082 • Malta

Citadel Insurance p.l.c. is a company authorised under the Insurance Business Act, Cap. 403, to carry on general and long term business of insurance and is regulated by the Malta Financial Services Authority.