



འབྲུག་རྒྱལ་ཉེན་སྲུང་ལས་འཛིན་ཚད།  
**ROYAL INSURANCE CORPORATION OF BHUTAN LTD.**  
 HEAD OFFICE: THIMPHU

**“NYEKOR NYENSUNG”**

*(COMPREHENSIVE TRAVEL INSURANCE POLICY FOR BHUTANESE PILGRIM)*

**ANNEXURE 1/PROPOSAL FORM**

**1. Details of the Travel Plan.**

Name of the pilgrimage operator: .....

Date of Journey: ..... Day ..... Month .....Year, Time of Boarding: .....

Place of Boarding: .....

Destination: ..... Expected time of Arrival: .....

Date of return: .....Day .....Month..... Year, Place of Arrival: .....

Duration of the Pilgrimage: .....

Mode of Travel (Please tick):

i. Road


ii. Air

iii. Others (Please Specify) .....

**2. Total Sum Insured = Nu. 430,000.00 per Member (Nu. 10,0000.00 for every cover except for search and missing person i.e. Nu. 30,000.00)**

**3. Details of the member(s) to be insured.**

Sl. No.	Name	Sex	D.O.B	CID No.	Name of a Person to be contacted in times of emergency	Contact no

**INSURE WITH RICB TO BE SURE**

Thimphu: Post Box: 315 EPABX ☎ +975-2-321037, 322426, 321161,323487,324282,325858,323993,336267,336758

Fax: 02-323677, 336086,336085,325725

Email: [ricbho@druknet.bt](mailto:ricbho@druknet.bt), Website: [www.ricb.com.bt](http://www.ricb.com.bt) Toll Free Nos: THIMPHU-181, PHUENTSHOLING-151



**RICB**

ལྷན་ ། འབྲུག་ རྒྱལ་ ཉེན་ གུང་ ལས་ འཛོལ་ ཚད་ །  
**ROYAL INSURANCE CORPORATION OF BHUTAN LTD.**  
 HEAD OFFICE: THIMPHU


**Declaration:**

I do hereby solemnly declare and warrant that the information given in this proposal is absolutely true and correct in every detail. I agree that the foregoing statement in this proposal and documents mentioned above shall be the basis of the proposed contract. Further, I agree that if I have made any false or fraudulent statements or suppressed, concealed or falsely stated any fact whatsoever the Policy shall be void and all rights to recover thereunder in respect of past, present or future claims shall be forfeited. The RICB shall bear no liability under such circumstances. I have read through the terms and conditions of the proposed insurance policy of RICB, a copy of which has been given to me and explained to me. I hereby agree to abide by them.

Date: .....  
 Place: .....

Signature of the Proposer/Tour Operator: .....

**INSURE WITH RICB TO BE SURE**