

mail knopftours greencard@aol.com EU phone +49 172 978 6218 +49 1573 37 37 335

APPLICATION FOR TOURIST MOTOR INSURANCE IN EUROPE LIABILITY MOTORCYCLE/AUTOMOBILE

Applicant [please	e fill out on computer]			
First Name		La	Last Name		
Street Address		City			
Zip Code		0	Country		
Phone		_			
Date of Birth (d/m	/y) <u> / /</u>				
lf you are over 65 ye supports you operat	ars old, then you will n ting a motorcycle.	eed a letter from a	physician stati	ng you medic	al history
Description of V	ehicle				
Make	_ Model/Type	Year	Plate Nur	nber	
*Actual Value in €	, 				
Chassis №./VIN			_ Country of R	Registration	
	valid in the country of notice of the notice		l be the basis o	n which your	claim will be
Coverage Optior					
Please Mark: Liability only					
	ge: From (d/m/y)) of coverage of 30 day				
	age Liability: Bodily Ir € 50.000 each clair travel group				
compensation of ma vehicle in former Ea	rd Party Liability and fo ax. € 20.500/ € 2.500 f astern Bloc countries is ailable for cars. Please co	or accessories, de s <u>not</u> covered. nsult with us.		00. The theft	of the insured

а, Bosnia, Estonia, Latvia, Lithuania, Moldova, Czech Republic, Macedonia, Romania, Turkey, Iran, Israel, Morocco, Tunisia, Azerbaijan, Montenegro, Cyprus, Belarus, Slovakia, Slovenia.

- Minimum age required for the insurance is 21.

 For sports cars and people aged 25 years or younger, there will be a 25% surcharge.
IMPORTANT: Knopf Unlimited is not the claims office. Contact the Green Card office (see the back of the original Green) Card) in the country where you need to claim. No refund is possible when green card is issued. Always carry the original Green Card with your vehicle.

Full E-Mail Address where to send the insurance documents to:

Credit Card Information

Name on Card	Credit Card Number		
Exp. Date (m/y)/	CVV		

I hereby declare that all information I have given are true.

Date _____

Signature _____