Aquilana Versicherungen
Bruggerstrasse 46, CH-5401 Baden
+41 56 203 44 22, kundendienst@aquilana.ch
www.aquilana.ch

aquilana
Gesundheit für Generationen

Request for an offer

Please send an offer to

Title Mrs Mr

Surname

First name

Street, No.

Post code, place

Home tel.

Business tel.

Email

For the following persons in the same household

Surname					
First name					
Female / male	f m	f m	f m	f m	f m
Date of birth					
Basic insurance, excess*	CHF	CHF	CHF	CHF	CHF
with accident cover					
OKP (O)/CASAMED (C)/					
SMARTMED (S)	O C S	O C S	O C S	O C S	O C S
Supplementary insurance					
Nursing care PLUS					
Nursing care TOP					
Hospital care					
Private, self-payment	CHF	CHF	CHF	CHF	CHF
Semi-private, self-payment	CHF	CHF	CHF	CHF	CHF
General					
Dental care					
Level	1 2	1 2	1 2	1 2	1 2
UTI					
Accident insurance	Tod CHF	Tod CHF	Tod CHF	Tod CHF	Tod CHF
for death and disability	Inv. CHF	Inv. CHF	Inv. CHF	Inv. CHF	Inv. CHF
KTI					
Lump sum insurance					
for death and disability	Death CHF	Death CHF	Death CHF	Death CHF	Death CHF
due to illness	Dis. CHF	Dis. CHF	Dis. CHF	Dis. CHF	Dis. CHF
with accident cover					

*The stated excess refers in each case to adults over the age of 19 and after the slash (/) to children up to age 18.

We thank you for your interest. Please send this request for an offer by email to kundendienst@aquilana.ch or by post to our business address. We will of course be happy to provide further information.