

**Burial and or repatriation insurance –
Generali DECESOS**

Details required to take out the insurance:

Name and surname	Relationship with the Insurant spouse daughter son other	NIE or Passport	Date of birth .././.....	Sex m/f	Beneficiary
1.					
2.					
3.					
4.					
5.					

- Address: _____
- ZIP-code: _____
- Country or city of repatriation _____
- Form of payment (yearly, half-yearly, quarterly, monthly)
(*underline as required*)
- Account number for debit of bills (ES..+ 20 digits):

Documents required to formalise the contract (copies):

- NIE or residence permit;
- foreign passport;
- copy of the first page of the bank book or other document to confirm the number of the bank account.