



บริษัท แอกซ่าประกันภัย จำกัด (มหาชน)  
AXA Insurance Public Company Limited  
1168/67 อาคารลุมพินีทาวเวอร์ ชั้น 23 ถนนพระรามสี่ แขวงทุ่งมหาเมฆ  
เขตสาทร กรุงเทพฯ 10120  
1168/67 Lumpini Tower 23<sup>rd</sup> Fl., Rama 4 Rd., Thung Mahamek,  
Sathorn, Bangkok 10120  
Tel. +66 2118 8111 Fax: +66 2285 6383  
Email: axathai@axa.co.th - axa.co.th  
ทะเบียนเลขที่ 0107537002729 เลขประจำตัวผู้เสียภาษี 0107537002729

Insurance Policy No. \_\_\_\_\_

Period of Insurance \_\_\_\_\_ to \_\_\_\_\_ Time \_\_\_\_\_ hrs.



**Insurance Certificate**  
**for Alien to apply for Non-Immigrant Visa Type O-A (Period 1 Year)**  
**SmartCare Executive Individual Health and Accident Insurance Policy Schedule**  
**(For Groups of Aliens to Enter the Kingdom on an exceptional case on**  
**Long-Stay Purpose in accordance with the Cabinet Resolution)**

This insurance certificate is issued to certify that Name .....  
Nationality ..... Gender ..... Age ..... Years Passport No. .... ,  
the insured person is insured by health insurance in accordance with the law and regulations for foreigners who apply for the Non-Immigrant Visa  
Type O-A (period 1 year). This health insurance also covers Covid-19 disease with the total sum insured of THB.....per policy year.  
(Subject to the benefits detailed in the schedule of the insurance policy)

The period of insurance begins from D/M/Y ..... at ..... hours until D/M/Y ..... at ..... hours  
as stipulated on the Insurance Policy No ..... of the AXA INSURANCE PUBLIC COMPANY LIMITED.

Remarks: The policy is issued by the insurance company in Thailand or a branch of foreign insurer established in Thailand.



\_\_\_\_\_  
( MR. Claude Seigne )  
Director

\_\_\_\_\_  
( MR. Somjate Khunsriuchen )  
Director

\_\_\_\_\_  
( MR. Somchai Trongwisalpattana )  
Authorized Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DD/MM/YY

**Contact No.**

**AXA Insurance Public Company Limited**

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**Thai General Insurance Association**

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