## **Individual Declaration Letter**

Sponsor	
Name	
Passport Number <i>or</i> Emirates ID Number	
Member Name(s)	Passport Number or EID Number
I, the "sponsor", declare the following:	
<ul> <li>☐ Husband not resident in UAE         The "member's" husband is not residing in the United Arab Emirates. I will notify Daman immediately if he becomes a resident of the United Arab Emirates.     </li> <li>☐ Non-UAE National spouse of UAE National         The "member" is my spouse. My spouse does not have any other health insurance. My spouse is not working. I will cancel my spouse's Basic (Abu Dhabi) plan and apply for the Thiqa programme for my spouse within 60 days after completing the visa process.     </li> <li>☐ New entrants - not working         The "member" is not working in the United Arab Emirates. If the employment status of the "member" changes, I will notify Daman immediately.     </li> <li>☐ Non married woman 18 years old and above         The "member" is my dependant. She is not married. If her marital status changes, I will notify Daman immediately.     </li> </ul>	
☐ Children under the age of 18 of GCC National sponsor	
I am sponsoring my own children under the age of 18 years.	
☐ Small Investor Monthly Income (Craft, Profession, Service license):  I Declare as "Investor" that I am not earning more than AED 5000/- and I undertake to notify Daman immediately in case of any increment in my income.	
I declare that all the information I provided in this document is true and correct. I understand that providing false or untrue information shall be considered a violation of the Health Insurance Law No. 23/2005 and its Executive Regulations No. 25/2006. This includes all other amending regulations, instructions, circulars, standards and/or resolutions as applicable in the Emirate of Abu Dhabi and any applicable Federal or State laws of the United Arab Emirates.	
(Sponsor Signature)	(Date)