Individual Insurance Submission

Submission ID: ac8a498a-1621-4e06-8a3e-1beb98cd89a1

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Field	Value
Full Name	John Doe
Age	32
Phone Number	+234-803-123-4567
Email	john.doe@email.com
Location	Lagos, Nigeria
Occupation	Software Engineer
Monthly Income Range	?500,000 - ?1,000,000
Number Of Dependents	3
Existing Medical Conditions	Hypertension, Diabetes Type 2
Regular Medications	Metformin, Lisinopril
Frequency of Hospital Visits	2-3 times per year
Preferred Hospitals/Clinics	N/A
Family Medical History	Father had heart disease, Mother has diabetes
Preferred Monthly Premium Range	?15,000 - ?25,000
Priority	High

Field	Value
Specific Coverage Needs	Emergency care, chronic disease management, preventive care
Preferred Payment Frequency	Monthly
International Coverage Needs	Yes - Business travel to UK and US
Current Insurance	Basic HMO with employer
Past Insurance Claims	?150,000 for emergency surgery in 2023
Maternity Coverage Needs	Yes - Planning for children
Emergency Services Priority	24/7 ambulance service, emergency room coverage
Preferred Mode of Healthcare	Private hospitals and specialists

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