



Contact person: Help desk (contact centre) / Phone: 6259 300 / E-mail: klienditugi@stat.ee / Postal address: Vabaduse plats 2, 71020 Viljandi

Statistical activity code: 21302

Insurance (month)

All insurance premiums receivable during the whole insurance period as of the month the insurance policy takes effect, irrespective of the subsequent premium payments, should be taken into account in the calculation of the amount of non-life insurance premiums.

Questionnaire code: 13562023

Submitted in: By the 15th date after the end of the reference month

Period:

Periodicity: Monthly

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Statistics Estonia guarantees the full protection of data submitted.

Economic unit
Registry code:
Name:

E-mail:
Phone:

Postal address
County:
City / Rural municipality:
Village / Town / City district:
Secondary address unit:

Street:
Building:
Apartment:
Postal code:

Economic activity in the sample

Completed by
Personal ID code:
Firstname and surname:

E-mail:
Phone:

Completed on (date):

Signature:

Insurance (month)

Questionnaire code: 13562023

Submitted in: By the 15th date after the end of the reference month

Period:

														ns 1...12 of the same row
..other life insurances	170													sum of column ns 1...12 of the same row
NON-LIFE INSURANCE	200	sum of rows 210...320 of the same column	sum of rows 210...320 of the same column	sum of rows 210...3 20 of the same column	sum of rows 210...3 20 of the same column	sum of rows 210.. .320 of the sam e colu mn	sum of rows 210...3 20 of the same column	sum of rows 210...3 20 of the same column	sum of rows 210...32 0 of the same column	sum of rows 210...320 of the same column	sum of rows 210...320 of the same column	sum of rows 210...320 of the same column	sum of rows 210...320 of the same column	sum of rows 210...3 20 of the same column
..motor third party liability insurance	210													sum of column ns 1...12 of the same row
..accident and sickness insurance	221													sum of column ns 1...12 of the same row
..sickness insurance	222													sum of column ns 1...12 of the same row
..travel insurance	230													sum of column ns

Insurance (month)

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3. TIME SPENT ON FILLING OUT THE QUESTIONNAIRE (only for April)

Please estimate how much time you spent on filling out the questionnaire (incl. time spent on reading the instructions, collecting and preparing data). Record the total time spent by all employees.

		Hours	Minutes
Time spent	1	1	2
For example, if it took 1.5 hours, i.e. 90 minutes, to fill in the questionnaire, enter 1 on the hours row and 30 on the minutes row	x		

Y2. Overall assessment on the questionnaire

	Answer
Please give an overall assessment on completing the questionnaire.	10 - Very easy 20 - Easy 30 - Average (neither easy nor difficult) 40 - Difficult 50 - Very difficult

Y3. Suggestions and comments

COMMENT