

My Business My Choice. Light Manufacturing



Protect your Business. Keep it Moving.

Downtime is not good for business, or your bottomline. One unexpected incident such as a fire, flood or theft could cause damage or loss. It could also wipe out your business. My Business My Choice, a tailor-made and unique business insurance package, provides you with affordable yet comprehensive insurance protection. With the flexibility of a standard plan plus optional covers, you can customise your policy to meet your individual business needs.

Flexible Coverage

From coverage for your physical property against all manner of risk to financial support in an event of a fire, take a look at the **Standard** and **Free Covers** we provide. What's more, you may increase the limit/sum insured under the Free Covers at a nominal additional premium if you require higher coverage. A wide range of **Optional Covers** is available as well to meet your more complex insurance needs.

Standard Cover

Fire and Extraneous Perils

Covers your property against physical loss or damage caused by fire and/or lightning, or arising out of aircraft damage, bursting and overflowing of water pipes, earthquake, windstorm, volcanic eruption, hurricane, cyclone, typhoon including full flood, smoke, explosion, vehicle impact damage, malicious damage and riot and strike.

Optional Covers

Burglary

Covers your property against loss or damage due to violent and forcible entry into or exit from your premises.

Work Injury Compensation

Protects you for any liability under Work Injury Compensation Act (WICA) 2008 (Cap 354) or at common law to compensate your employees for death or bodily injury due to an accident in the course of employment.

Public Liability

Protects you against legal liability to third parties for accidental bodily injury or accidental property damage.

Personal Accident

Provides 24-hours' worldwide coverage for you and your employees against:

Benefits and Plans	Plan 1	Plan 2	Plan 3
Accidental Death and Permanent Disablement	S\$50,000	S\$100,000	S\$150,000
Accident Medical Reimbursement	S\$500	S\$1,000	S\$1,500
Weekly Indemnity for Temporary Total Disablement (per week)	S\$50	S\$100	S\$150
Weekly Indemnity for Temporary Partial Disablement (per week)	S\$25	S\$50	S\$75

Equipment All Risks

Covers your equipment/machinery (age of machine not exceeding 5 years) against accidental physical loss or damage from any external causes not specifically excluded.
Excess: S\$500 for each and every loss

Fidelity Guarantee

Insures you against loss of money and/or property due to fraud or dishonesty of your employees.
Excess: S\$250 for each and every loss

Free Covers!

Fire Consequential Loss

Covers loss of profits and/or additional expenses as a result of physical loss of or damage to the property insured under Fire & Extraneous Perils section.

Money and Securities

Covers loss of money and securities kept within the insured premises and whilst in transit due to robbery, burglary and theft.

Free Covers and Additional Benefits at a Glance

Cover	Sum Insured / Limit
<p>STANDARD COVER Fire and Extraneous Perils</p> <p>Free Additional Benefits</p> <ol style="list-style-type: none"> Awnings, Blinds, Signs or Other Outdoor Fixtures or Fittings or Any Description Curiosities and Works of Art Deterioration of Stocks (age of machine not exceeding 6 years) Goods in Transit Loss or damage to clothing and/or personal effects of sole proprietor/partners/directors/employees Plate Glass Breakage Rental Expenses for existing rent, alternative accommodation and cost of temporary storage of Insured Property 	<p>Up to S\$5,000</p> <p>Up to S\$3,000</p> <p>Up to S\$2,000</p> <p>Up to S\$10,000</p> <p>Up to S\$500 per person & S\$2,500 in aggregate</p> <p>Up to S\$5,000</p> <p>Up to S\$35,000</p>
<p>FREE COVERS Fire Consequential Loss</p> <ol style="list-style-type: none"> Loss of profits and/or additional expenses (a max. of 100 days) Closure of business by order of public authority due to: <ul style="list-style-type: none"> Defective Sanitary Arrangement (Time Excess: 24 hours) Denial of Access Murder and Suicide Failure of supply of electricity, gas, water and telecommunication services due to property damage of supply authorities (Time Excess: 24 hours) 	<p>Up to S\$250 per day</p>
<p>Money and Securities</p> <ol style="list-style-type: none"> Loss of Money and Securities whilst: <ul style="list-style-type: none"> Inside Insured Premises during business hours Inside Insured Premises after business hours (subject to a sub-limit of S\$2,000 in all locked cabinets/drawers/cash registers) Outside Insured Premises anywhere in Singapore Loss of Money kept overnight at private residence of sole proprietor/partners/directors/employees Loss or damage to safes/strongrooms/cabinets/drawers/cash registers 	<p>Up to S\$5,000</p> <p>Up to S\$5,000</p> <p>Up to S\$5,000</p> <p>Up to S\$500</p> <p>Up to S\$500</p>
<p>OPTIONAL COVERS Burglary</p> <p>Free Additional Benefits</p> <ol style="list-style-type: none"> Armed Robbery and/or Hold Up Cost of Temporary Protection 	<p>Up to S\$2,500</p>
<p>Work Injury Compensation (Subject to Common Law Limit of S\$10 million per occurrence)</p> <p>Free Additional Benefits</p> <ol style="list-style-type: none"> Non-Manual Overseas Business Trips Travelling To and From Residence/Work 	<p>Up to S\$20,000 per employee & S\$250,000 in the aggregate for all employees</p>

Cover	Sum Insured / Limit
<p>Public Liability</p> <p>Free Additional Benefits</p> <ol style="list-style-type: none"> Defective Sanitary Arrangement Food Poisoning First Aid Facilities Loading and Unloading Medical Payments Neon Sign Board Non-Manual Overseas Business Trips Plant and Machinery Tenant's Liability 	<p>Up to S\$250,000 per occurrence & in the aggregate</p> <p>Up to S\$250 per accident</p> <p>Up to S\$250,000 per occurrence</p>
<p>Personal Accident</p> <p>Free Additional Benefits</p> <ol style="list-style-type: none"> Hijack, Murder and Assault Strike, Riot, Civil Commotion and Terrorism 	

Light Manufacturing is specially designed for businesses involved in manufacturing and assembly of goods.

Excluded Activities/Risks/Trades:

- | | |
|--|---|
| 1. Abalone, Bird's Nests, Sharkfins and Chinese Herbs | 13. Liquor & Tobacco |
| 2. Antiques, Curios/Works of Art, Collectibles & Furs | 14. Livestock, Nurseries & Landscaping |
| 3. Auto Spare Parts, Batteries & Tyres | 15. Logistics, Transportation & Freight Forwarders |
| 4. Blasting, smelting or other operations involving hazardous activities | 16. Motor Workshops/Showrooms |
| 5. Coins/Currency Notes & Stamps | 17. Paper/Timber/Wood/Rattan Products |
| 6. Combustible, Flammable & Hazardous Goods | 18. Plastic Moulding |
| 7. Construction and Ship Building/Ship Repairing | 19. Plastic, Rubber, Foam, Mattress & Beddings |
| 8. Contractors of Any Trade | 20. Property kept in the open or without perimeter/fence/security |
| 9. Gems, Jewellery, Precious Stones/Metals, Watches and Valuable Items | 21. Risks not situated in Singapore |
| 10. Integrated Circuit Chips | 22. Shared Premises/Multi-Tenanted Locations |
| 11. Joss Sticks/Joss Papers | 23. Spraying Painting |
| 12. Junk/Second Hand Goods & Scrap Metals | 24. Use of Furnace/Kiln |
| | 25. Works involving height more than 30 feet above ground/floor level |
| | 26. Works on Board Vessel/Offshore Works |

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please visit the Chartis, GIA or SDIC websites (www.chartisinsurance.com.sg or www.gia.org.sg or www.sdic.org.sg).

LIGHT MANUFACTURING

Application Form

Important Notes

- Statement Pursuant to the Insurance Act (Cap. 142) or any amendments thereof:
You are to disclose in the proposal, fully and faithfully, all the facts which you know or ought to know, otherwise the policy issued may be void and you may receive nothing from the policy.
- No insurance is in force until this application is accepted by the Company in accordance to policy terms, conditions and exclusions.
- The specific terms, conditions and exclusions applicable to this insurance are set out in the Policy, a copy of which is available upon request.
- If your proposal is accepted, it is a condition precedent to our liability under the Policy that the premium must be paid to and received by us within 60 days from the inception of the insurance, failing which the Policy shall deem to be automatically terminated and a pro-rata premium will be charged for the period that we are on risk.

1 Proposer Information

Business Name:

Business Registration No.:

Correspondence Address:

Blk/Building No. Level No. # - Unit No.

Street Name

Building Name

Country

Postal Code

Location of Insured Property:

Blk/Building No. Level No. # - Unit No.

Street Name

Building Name

Country

Postal Code

Office Telephone No.:

Office Facsimile No.:

Customer Contact Details:

Name Designation

Mobile No. DID No.

Email

Period of Insurance:

From dd/ mm/ yy to dd/ mm/ yy

Nature of Business:

2 Please tick the appropriate box(es) to indicate nature of your business.

- | | |
|--|--|
| <input type="checkbox"/> Electronic Components, Computers & Peripheral Equipment | <input type="checkbox"/> Printed Circuit Boards |
| <input type="checkbox"/> Industrial Machinery | <input type="checkbox"/> Printing/Publishing |
| <input type="checkbox"/> Machine Tools | <input type="checkbox"/> Signs & Advertising Specialties |
| <input type="checkbox"/> Motor Generators | |
| <input type="checkbox"/> Others (Pls specify: _____) | |

3 Select plan and calculate premium.

YES! I/We would like to take up this cover.

STANDARD COVER	Sum Insured/ Limit of Liability	Rates	Premium
<input checked="" type="checkbox"/> Fire & Extraneous Perils	Building excluding foundation S\$ _____ Landlord's Fixtures & Fittings, Furniture, Fixtures & Fittings, Equipment, Plant & Machinery, Office & Business Contents S\$ _____ Stock & Material in Trade S\$ _____ (Max. Limit: S\$2,000,000)	0.09% 0.12% 0.12%	Min. Premium S\$150
Premium for STANDARD COVER (A)			S\$ _____

ADDITIONAL TOP-UP	Sum Insured/ Limit of Liability	Top-Up Rates	Premium
<input type="checkbox"/> Fire Consequential Loss (Free Limit: S\$250 per day up to 100 days)	S\$ _____ (Max. Limit: S\$500 per day up to 100 days)	S\$40 per S\$50	
<input type="checkbox"/> Money & Securities	Inside Insured Premises during business hours: S\$ _____ (Max. Limit: S\$15,000) Inside Insured Premises after business hours: S\$ _____ (Max. Limit: S\$15,000) Outside Insured Premises: S\$ _____ (Max. Limit: S\$15,000) (Free Limit: S\$5,000 per item)	0.60% 0.60% 0.60%	
Premium for FREE COVERS TOP-UP (B)			S\$ _____

OPTIONAL COVERS	Sum Insured/ Limit of Liability	Rates	Premium
<input type="checkbox"/> Burglary	Office & Business Contents, Stock & Material in Trade S\$ _____ (Max. Limit: S\$500,000)	0.20%	
<input type="checkbox"/> Work Injury Compensation	Estimated Wages Non-Manual Staff: Admin: S\$ _____ Outdoor: S\$ _____ Manual Staff: S\$ _____ (Max. Limit: 25 employees)	0.08% 0.25% 2.00%	
<input type="checkbox"/> Public Liability	<input type="checkbox"/> S\$250,000 <input type="checkbox"/> S\$500,000 <input type="checkbox"/> S\$1,000,000 <input type="checkbox"/> S\$2,000,000 (Any One Accident & Unlimited Any One Period)	S\$250 S\$300 S\$400 S\$600	

OPTIONAL COVERS	Sum Insured/ Limit of Liability	Rates	Premium
<input type="checkbox"/> Personal Accident	No. of Insured Persons Non-Manual Staff: <input type="checkbox"/> Plan 1: _____ <input type="checkbox"/> Plan 2: _____ <input type="checkbox"/> Plan 3: _____ Manual Staff: <input type="checkbox"/> Plan 1: _____ <input type="checkbox"/> Plan 2: _____ <input type="checkbox"/> Plan 3: _____	(Per Staff) S\$38 S\$75 S\$113 S\$48 S\$98 S\$148	
<input type="checkbox"/> Equipment All Risks	S\$ _____ (Max. Limit: S\$100,000) (List of equipments to be provided)	0.30%	
<input type="checkbox"/> Fidelity Guarantee	<input type="checkbox"/> S\$5,000 <input type="checkbox"/> S\$10,000 (Per Occurrence & in the Aggregate)	S\$200 S\$400	
Premium for OPTIONAL COVERS (C)			S\$
Premium for A + B + C			S\$
Prevailing GST			S\$
TOTAL PREMIUM PAYABLE			S\$

Note: Annual premium is on a per location basis unless units are adjoining.

4 Additional Information (For Personal Accident)			
(Please fill in the details of the Insured Persons if you have selected this optional cover.)			
Details of Insured Persons to be covered			
Name	NRIC	Year of Birth	Plan

Age Limit - 65 years old
(If space is insufficient, please attach a separate sheet.)

5 The following must be answered by the Proposer. (Please tick in the appropriate box.)	
1. What are the fire preventive measures available at your premises? <input type="checkbox"/> Fire Extinguisher <input type="checkbox"/> Fire Alarm System <input type="checkbox"/> Hosereel <input type="checkbox"/> Sprinkler System If none of the above, please refer to the Company.	
2. What are the security preventive measures available at your premises? <input type="checkbox"/> 24-hr Security Guard <input type="checkbox"/> CCTV <input type="checkbox"/> Burglary Alarm System <input type="checkbox"/> Solid Door/Glass Door <input type="checkbox"/> Gates/Grilles/Roller Shutter If none of the above, please refer to the Company.	
3. What is the type of property for the location of insured property? <input type="checkbox"/> Office Building/Commercial Building <input type="checkbox"/> Industrial Building <input type="checkbox"/> Shopping Mall <input type="checkbox"/> Pre-war Building (Refurbished) <input type="checkbox"/> HDB Shop <input type="checkbox"/> Pre-war Building (Non-Refurbished) <input type="checkbox"/> Shop House	

4. Is your insured premises shared with other companies? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please furnish details of your co-tenant's business.
5. Did you suffer any losses in the past 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please furnish full details of all claims for the past 5 years. Date of Loss Nature of Loss Amount Claimed (S\$)

(If space is insufficient, please attach a separate sheet.)

6 Payment Mode
By Cheque payable to Chartis Singapore Insurance Pte. Ltd. Cheque No.: Bank: Amount:
By Credit/Charge Card I/We hereby authorise Chartis Singapore Insurance Pte. Ltd. to charge the stated annual premium to the following credit card/bank account. Where a third party credit card is used, I/We declare that the cardholder has authorised and consented to its use.
<input type="checkbox"/> Full Premium Payment (Any MasterCard/Visa Card) <input type="checkbox"/> 6 Monthly 0% Interest Instalments*^ (Only with DBS/POSB credit card*) <input type="checkbox"/> 12 Monthly 0% Interest Instalments*^ (Only with DBS/POSB credit card*)
Card No.: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Expiry Date: mm / yy
Name as appear on card: _____
<small>† Subject to DBS Card Agreement terms and conditions; not applicable for DBS Corporate Card. *Actual Instalment amounts may differ due to rounding off. ^Minimum Total Premium Payable must be S\$300 and above.</small>

7 Declaration
(1) I/We declare the above particulars to be true and correct, and agree that they shall be the basis of the contract between Chartis Singapore Insurance Pte. Ltd. and me/us. (2) I/We understand that Personal Accident Section is a Personal Accident Policy and benefits shall be payable upon the occurrence of an accident, subject to applicable terms, conditions and exclusions. (3) I/We declare that the insured premise is constructed of brick/ tile/concrete. (4) I/We declare that my/our previous proposal or renewal has never been declined. (5) I/We agree that any information collected or held by Chartis Singapore Insurance Pte. Ltd. ("Chartis")(whether contained in the Application or otherwise obtained) may be used and disclosed by Chartis to its associated individuals/companies or any independent third parties (within or outside Singapore) for any matters relating to this Application, any Policy issued and to provide advice or information concerning products and services which Chartis believes may be of interest to me/us, and to communicate with me/us for any purposes.
Proposer's Signature & Company Stamp Date

Agent's Particulars
Name:
Producer Code:
Mobile No.:

For Official Use Only
Policy No.:
Blk Card No.:
Signature:

My Business My Choice.

Chartis is one of the world's leading property-casualty and general insurance organizations. Serving more than 45 million commercial and personal clients in more than 160 countries and jurisdictions, Chartis has a 90-year history, one of the industry's most extensive ranges of products and services, and excellent financial strength.

Chartis is the marketing name for the worldwide property-casualty and general insurance operations of Chartis Inc. For additional information, please visit our website at <http://www.Chartisinsurance.com>. All products are written by insurance company subsidiaries or affiliates of Chartis Inc. Coverage may not be available in all jurisdictions and is subject to actual policy language. Non-insurance products and services may be provided by independent third parties.



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Co. Reg. No. 201009404M

This insurance is underwritten by Chartis Singapore Insurance Pte. Ltd. Coverage may not be available in all jurisdictions and is subject to actual policy language. Non-insurance products and services may be provided by independent third parties. Certain coverage may be provided by a surplus lines insurer. Surplus lines insurers do not generally participate in state guaranty funds and insureds are therefore not protected by such funds.