

Premier Home Assurance Proposal Form

YES, I would like to have my home and family protected with Premier Home Assurance

By Mail:
CHARTIS Building
78 Shenton Way, #07-16
Singapore 079120

By Phone or Fax:
Tel: 6419 3000
(Mon – Fri, 9am – 5pm)
Fax: 6415 3723

Proposer's Details

Name (Mr/Mrs/Mdm/Miss): _____

NRIC/Passport No.: _____ Date of Birth (DD/MM/YY): _____

Occupation: _____ Sex: M / F Marital Status: _____

Email: _____

Tel. No.: _____ (HP) _____ (H) _____ (O)

Address: _____

_____ Postal Code _____

Dwelling Type: HDB Condominium Apartment Terrace Semi-Detached
 Bungalow Others (please specify) _____

Family Details (For Personal Accident & Accidental Medical Benefits)

Name of Spouse (Mr/Mrs/Mdm/Miss): _____

NRIC/Passport No.: _____ Date of Birth (DD/MM/YY): _____

Occupation: _____

Particulars of Children* (for complimentary coverage)

1. Name: _____ Date of Birth (DD/MM/YY): _____

2. Name: _____ Date of Birth (DD/MM/YY): _____

3. Name: _____ Date of Birth (DD/MM/YY): _____

* Insured and spouse must be below 65 yrs and children between 1 - 18 years or not over 24 years if he/she is a full-time student in an institution of higher learning or recognised school.

Loss History

Have you made similar insurance claims for the last 3 years? Yes No

(If yes, please provide details) _____

Producer's Name	
Producer's Code	
Producer's Contact No.	

Period of Insurance

Proposed period of insurance to take effect from _____ for 1 year.

Plan Options

Please tick preferred option	Annual Premium (inclusive of 7% GST)
<input type="checkbox"/> Plan A	\$238.00
<input type="checkbox"/> Plan B	\$325.00
<input type="checkbox"/> Plan C	\$437.00

Please increase my Household Contents Cover by \$ _____

for an additional annual premium of \$ _____

@ \$32.10 for every \$10,000 additional sum insured

Please include my Building Cover for \$ _____

for an additional annual premium of \$ _____

@ \$64.20 for every \$100,000 additional sum insured

Payment Mode

By Credit Card

Visa Mastercard AMEX for \$ _____

Card No.: _____ Expiry Date(MM/YY): _____

Cardholder's Name: _____

By Cheque

Please make cheque payable to Chartis Singapore Insurance Pte. Ltd. for \$ _____

Cheque No.: _____

Bank: _____

By Annual GIRO with Automatic Renewal

Please complete the attached Interbank GIRO Payment Authorisation Form

Important

- No insurance is in force until premiums are received and the Policy is issued by Chartis Singapore Insurance Pte. Ltd.
- This document is not a contract of insurance. The specific terms, exclusions and conditions applicable to this insurance are set out in the Policy.
- Statement Pursuant to the Insurance Act or any amendments thereof; You are to disclose in this Proposal Form, fully and faithfully, all the facts you know or ought to know, otherwise, the Policy issued may be void and you may receive nothing from this Policy.

Declaration & Authorisation

I/We declare:

- That in respect of any of the risks to be insured:
 - No loss, damage, injury or liability has arisen in the last few years; and
 - There are no reasons that may cause my/our property to be at higher risk of loss or damage than normal.
- That the above particulars are true and correct and I/we agree that my/our warranties, declarations and disclosures herein shall form the basis of the contract between Chartis Singapore Insurance Pte. Ltd. (Chartis) and myself/ourselves if the application is being approved.
- And I agree on behalf of myself/ourselves and any person(s), firm or corporation that any information collected or held by Chartis (whether contained in this Application or otherwise obtained) may be used and disclosed by Chartis to 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.
- Where a third party credit card is used, I/we declare that the cardholder has authorised and consented to such use.
- That I am/we are ordinarily resident(s) in Singapore as defined by the Insurance Act (Cap. 142) (Amendment of First Schedule) Order 2010.
- That I/we have received, read and understood, or have been advised of and understand, the contents of the brochure and any information material relating to this insurance product.

Signature of Proposer _____

Date _____

This insurance is underwritten by Chartis Singapore Insurance Pte. Ltd.



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