

Domestic Maid Proposal Form

Statement Pursuant to Section 25(5) of the Insurance Act, Singapore: You are to disclose in this Proposal Form fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder may be void.

1. PARTICULARS OF THE EMPLOYER / PROPOSER			
NAME: (MR / MRS / MDM / MS / DR)			
ADDRESS:			S ()
TEL:	HP:	EMAIL ADDRESS:	
NATIONALITY:		NRIC/PASSPORT NO. :	
OCCUPATION:		SB TRANSMISSION REF NO. :	
2. PARTICULARS OF THE MAID / INSURED PERSON			
NAME OF MAID / INSURED PERSON:			
DATE OF BIRTH:		NATIONALITY: Filipino / Indonesian / Thai / Indian /	
PASSPORT NO.:		WP NO.:	
3. PERIOD OF INSURANCE			
FROM:		TO:	(both dates inclusive)
<small>(or until the cessation of the employment whichever is earlier)</small>			
4. PARTICULARS OF THIRD PARTY GUARANTOR / JOINT PROPOSER (Section 4 need to be filled up only when Third Party Guarantor is required)			
NAME OF GUARANTOR / COMPANY:			
ADDRESS:			
OCCUPATION / BUSINESS:		NRIC NO. / CO. REG. NO.:	
ANNUAL INCOME / PAID UP CAPITAL:		TEL NO. :	

Coverage Selected

- Plan 1
 Plan 2
 Plan 3
 With Bond Protector
 Philippine Embassy Bond \$2,000
 Philippine Embassy Bond \$7,000

I hereby declare that the information given above is true and complete and that I have not withheld any material fact. This Proposal and any Guarantee issued pursuant to this Proposal shall be subject to the Counter Indemnity below to which terms and conditions I agree. It is hereby agreed that a signed proposal form and counter indemnity received by facsimile or otherwise shall be deemed binding and legally enforceable in a court of law.

Signature of Witness

Name : _____

NRIC No. : _____

Address : _____

Signature of Employer / Proposer

Signature of Joint Proposer / Third Party Guarantor

Date: _____

TERMS AND CONDITIONS OF COUNTER INDEMNITY FOR LETTER OF GUARANTEE APPLIED FOR ABOVE



In consideration of China Taiping Insurance (S) Pte. Ltd., 3 Anson Road #16-00 Springleaf Tower Singapore 079909 (the Company) agreeing at the request of the party executing this Counter Indemnity to issue a Letter of Guarantee in favour of the Ministry of Manpower, Singapore (MOM) for the sum of \$5,000 (hereinafter called the MOM Guarantee) guaranteeing the satisfactory performance and observation of the conditions imposed on the Employer by the MOM in the Security Bond executed by the Employer in favour of the MOM and/or to issue a Letter of Guarantee in favour of the Labour Attache (the Labatt), Embassy of the Philippines for the sum of \$2,000.00 or \$7,000.00, whichever applicable, (hereinafter called the Labatt Guarantee) (collectively known as the Guarantees) guaranteeing the satisfactory performance and observance of the conditions imposed on the Employer by the Labatt in the Embassey of the Philippines' Standard Employment Contract for Filipino workers in Singapore executed by the Employer in favour of the Labatt. I the Employer hereby agree as follows:

- I hereby irrevocably and unconditionally undertake for myself/my heirs executors administrators assigns and successors, as a continuing obligation, to indemnify the Company on demand in full against all claims payments demands actions suits proceedings losses liabilities costs interests and expenses whatsoever which may be taken or made against it or incurred or become payable by it under or in respect of either or both the Guarantees including, without limitation, any legal and other costs on an indemnity basis, charge interest or expense incurred by the Company in connection with either or both the Guarantees of this Counter Indemnity. I agree that the Company may in its absolute discretion compromise all claims payments demands actions suits proceedings losses liabilities which may be taken or made against it under either or both the Guarantees. I also agree to accept all receipts vouchers and other evidence of all payments made by the Company or of all liabilities or obligations incurred by it by reason of either or both the Guarantees as conclusive evidence against me and my estate of the fact and extent of my liability herein to the Company.
- I further agree that you will be entitled to impose an interest charge of 9% per annum on any sum of money paid out by you on my/our behalf in connection with the above Bond whether to the Controller of Immigration or otherwise and that such interest will be payable on any sum(s) of money paid by you on my/our behalf in the event that I/We do not settle the said outstanding payment(s) made on my/our behalf within 7 days from the date I/We am/are given notice by you of the same.
- My liability hereunder is irrevocable and shall remain in full force or effect until the Company's liability under either or both the Guarantees is discharged.

DOMESTIC MAID INSURANCE AND BOND PACKAGE

Section	Cover	Plan 1	Plan 2	Plan 3
1	Personal Accident Benefits: A) Accidental Death B) Permanent Disablement C) Medical Expenses	\$40,000 \$40,000 \$1,000	\$40,000 \$40,000 \$3,500	\$40,000 \$40,000 \$5,000
2	Repatriation Costs	\$10,000	\$10,000	\$10,000
3	Hospital & Surgical Expenses Annual Limit	\$30,000 \$15,000	\$36,000 \$18,000	\$40,000 \$20,000
4	Termination Expenses	Nil	\$250	\$500
5	Wages & Levy Reimbursement	Nil	\$20 per day Max 60 days	\$30 per day Max 60 days
6	Recuperation Expenses	Nil	\$20 per day	\$30 per day
7	Security Bond	\$5,000	\$5,000	\$5,000
Premium		\$246.10 (\$230 + GST \$16.10)	\$267.50 (\$250 + GST \$17.50)	\$299.60 (\$280 + GST \$19.60)

OPTIONAL COVER Please tick <input checked="" type="checkbox"/>		
SECTION 8	Bond Protector (Excess \$200) #Reimburses the insured for the loss of the Security Bond if forfeiture due to maid's fault, subject to an excess of \$200.	Additional premium of \$53.50 (\$50+ GST \$3.50)

MODE OF PAYMENT Please tick <input checked="" type="checkbox"/>	
<input type="checkbox"/> CASH / NET - PAYMENT AT OUR 15 TH FLOOR OFFICE <input type="checkbox"/> CHEQUE - PAYMENT TO "CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD." <input type="checkbox"/> CREDIT CARD   <input type="checkbox"/> DEBIT CARD	
NAME OF CARD HOLDER: _____	
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: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Month Year	
AMOUNT: _____	
I AUTHORISE CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. TO DEBIT MY CARD FOR THE ABOVE AMOUNT.	
_____ SIGNATURE OF CARD HOLDER / DATE	
UPON RECEIPT OF YOUR APPLICATION & PAYMENT, WE WILL PROCEED WITH THE NECESSARY DOCUMENTATION WITH MOM.	

ABOUT US

China Taiping Insurance (Singapore) Pte. Ltd. has been operating in Singapore since 1938. We are a member of China Taiping Insurance Group Co., a state-owned financial and insurance group of The People's Republic of China with diversified businesses in more than 20 subsidiaries worldwide.

With more than 70 years of establishment, we have grown to become one of the leading general insurers in Singapore. We offer a wide range of insurance products including motor, home, travel, personal accident, fire, public liability, marine, work injury compensation, contractor's all risks, performance bond, foreign worker bond, foreign worker's medical insurance etc.

We provide quality insurance service to our clients through a high standard of professionalism and we aim to build a distinctive "China Taiping" brand in the world of financial field.

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 and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact us or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

中国太平保险 (新加坡) 有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Tel: 6389 6111 Fax: 6220 3901

Website: www.sg.cntaiping.com Co. Reg. No. 200208384E

Ref: DMIPF (Direct) 02/2017

PERSONAL DATA COLLECTION STATEMENT

China Taiping Insurance (Singapore) Pte Ltd (“CTIS”) recognises its obligations under the Personal Data Protection Act 2012 (PDPA) which includes the collection, use and disclosure of personal data for the purpose for which an individual has given consent to.

The personal data collected by CTIS includes all personal data provided in this form, or in any document provided, or to be provided to us by you or your insured persons or from other sources, for the purpose of this insurance application or transaction. It includes all personal data for us to evaluate or administer this application or transaction

You may not alter any of the wordings in this “Personal data collection statement”. Any attempt to do so will be of no effect.

1. To process, administer and/or manage your relationship, account and policy with CTIS, CTIS will necessarily need to collect, use, disclose and/or process your personal data or personal information about you. Such personal data includes (i) information set out in this Personal Data Collection Statement and any other personal information provided by you or possessed by CTIS and (ii) your claims.
2. Such personal data will be collected, used, disclosed and/or processed by CTIS for the purpose (s) of:
 - (a) considering whether to provide you with the insurance you applied for;
 - (b) processing your application for underwriting and insurance;
 - (c) administering and/or managing your relationship, account and/or policy with CTIS;
 - (d) processing and/or dealing with any claims including the settlement of claims and any necessary investigations relating to the claims, under your policy;
 - (e) carrying out due diligence or other screening activities (including background checks) in accordance with legal or regulatory obligations or risk management procedures that may be required by law or that may have been put in place by CTIS;
 - (f) carrying out your instructions or responding to any enquiries by you;
 - (g) dealing in any matters relating to the services and/or products which you are entitled to under this policy which you are applying for or have applied; (including the mailing of correspondence, statements, invoices, reports or notices to you, which could involve disclosure of certain personal data about you to bring about delivery of the same as well as on the external cover of envelopes/mail packages);
 - (h) investigating fraud, misconduct, any unlawful action or omission, whether relating to your application, your claims or any other matter relating to your policy, and whether or not there is any suspicion of the aforementioned; and/or
 - (i) complying with applicable law in administering and managing your relationship with CTIS.

(Collectively the “Purpose”)

3. We may/will also be collecting from sources other than yourself, personal data about you, for one or more of the above Purposes, and thereafter using, disclosing and/or processing such personal data for one or more of the above Purposes.
4. Your personal data may/will be disclosed by CTIS to its third party service providers or agents (including its lawyers/law firms) which may be sited outside of Singapore, or one or more of the above Purposes, as such third party service providers or agents, if engaged by CTIS would be processing your personal data for CTIS for one or more the above Purposes.
5. by signing below, you:
 - (a) consent to CTIS collecting, using, disclosing and/or processing your personal data for the Purposes as described above;
 - (b) consent to CTIS collecting personal data about you from sources other than yourself and using, disclosing and/or processing the same, for one or more the Purposes as described above;
 - (c) consent to CTIS disclosing your personal data to its third party service providers, or agents (including its lawyers/law firm), for the Purposes as described above;
 - (d) consent to CTIS transferring your personal data out of Singapore to its third party service providers, or agents where such third party service providers or agents are sited (whether in Singapore or outside of Singapore), for the Purposes as described above.

I have read and agree to the above.

Name:

NRIC No:

Date: