

PRIVATE VEHICLE - MOTOR INSURANCE PROPOSAL FORM						
Policy No.		Agent/Broker:	Agent/Broker Code:			
Quotation No.						
Cover Note No.						

Under Section 23(5) of the Insurance Act, you have to disclose to the Insurer in this Proposal Form, fully and faithfully, all the facts which you know or ought to know in respect of the risk that is being proposed; otherwise, the policy issued hereunder may be void.

IMPORTANT

- The Liability of the Company does not commence in respect of this proposal until acceptance has been communicated by the Company to proposer or his agent or broker.
- All questions in this Proposal Form must be answered before this Proposal can be considered. Any question not answered will be taken as answered in the negative.
- All policies, renewal certificates, cover notes, endorsements for policies carry a Premium Warranty Clause which requires the premium to be paid in full within a specific period failing which would be no liability under the policy, renewal certificate, cover note, endorsement, etc.
- 4 All amendments and/or corrections are to be initial by the insured.
- Your Personal Data Is Important To Us. This is an application for an insurance product provided by China Taiping Insurance Singapore Pte. Ltd. ("CTPIS" or "Company"). We will use all information provided in this form to assess your application for our insurance product and services. Before you provide any information in this form, please read our Privacy Policy which is made available on our website at www.sg.cntaiping.com/en/privacypolicy
- 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).

PLEASE COMPLETE IN BLOCK LETTERS AND INK

Tick boxes as appropriate and delete at (*) accordingly. Any amendments require the signature of the Proposer.

Details of Proposer								
Name								
NRIC / Passport No. / C	ompany l	Reg.No.			Date of Birth (dd/mm/yy	yy)		
					D D I M	M / Y		
Marital Status	Gende	er	National	ity				
○ Single ○ Married	○ Ma	le	Singa	aporean	Others, please s	pecify:		
Address								
						Postal (Code:	
Contact Details								
Home No.: Office No.:			Mobile No. (Mandatory): Email Address (Mandatory):		ress (Mandatory):			
Date of obtaining Singar	oore Drivi	ing License	Occupat	ion / Bu	siness			
Details of Vehicle								
Registration No		Make & Model			Year of Make		Registration Dat	е
Engine No Chassis No		Chassis No	C.C. / Tonnage			Seating Capacity		
Electric Vehicle		○ Yes ○ N	No					
Type of Vehicle		Saloon	○ Hat	tchback	○ Stationwa	agon	○ SUV	○ MPV
(Tick one)		Roadster	○ Jee	ep	O Coupe / 0	Convertible /	Cabriolet	
Type of Vehicle (Tick all that is applicable)		Off Peak Car	r O	Modified	d Vehicle (Decline)			
Hire Purchase Company	/							

*Refer to Declaration section on Page 3 for more information

3	Cov	erage Required							
3									
	Perio	od of Cover	From				(To coincide w	with Road Tax expiry date if possible)	
			O Compre	ehensive	O Third P	Party Fire & The	ft	O Third P	arty Only
	Type	e of Cover	For Comprehensive and Third Party Fire & Theft, coverage is based on market value at the time of loss. AutoSafe Scheme (Authorised Workshop Only) Yes						
	Турс	, 01 00 001					O Yes	○ No	
			Applicable to Comprehensive Coverage only. Refer to Declaration section on Page 3 for more information.						
4	Veh	icle Usage							
			(a) Will the	vehicle he use	ed for hire or reward?			O Yes	○ No
	(a) Will the vehicle be used for hire or reward? Private Car (b) Will the vehicle be used for carriage of passengers for hire or reward?					○ Yes ○ No			
	1 1100	ato our			o you drive in to Malaysia?				O 140
_	Non	and and Hanamad Driv		on do you anve	o in to malayola.				
5	Named and Unnamed Drivers								
	Named Driver(s) - must be above 29 years old or below 65 years old as at last birthday with at least 3 years Singapore driving exper							ng experience	
	Nam	Name of Driver D.O.B Pass Date NRIC No.		0.	Gend	er			
	This	Section applies only to Priva	te Car Policy	<u>/</u> :					
		red and Named Drivers enjoy e event of an Own Damage C				ontinental cars	and up to S\$1	1,000 for co	ntinental cars)
	III (II)	e event of an Own Damage C	iaiiii iiiaue a	at our Authorise	eu vvorksnops.				
	Unna	amed Driver Additional Exces	s:						
		*Age / Driving Experie	nce		Additional Excess				
		≥ 26** S\$500							
		≤ 25			S\$3,000				
		< 1 year driving experience** S\$3,000							
		*Age as at date of accident							
	**S\$3,	500 is the maximum unnamed driver add	<u>litional</u> excess ap	pplicable for young ar	nd inexperienced drivers unles	ss otherwise specified	in the policy sched	lule.	
6	Win	dscreen Replacement (Automatic Reinst	atement)					
	1.	Replace at any Authorised D	Distributor W	orkshops (withi	in warranty period - m	naximum 3 year	s)	. unlimited	
	2.	Replace at any of our Autho	rised Works	hops				. unlimited	
	3. Other than the above								
	up to S\$3,000/- AP: S\$50/-								
	up to S\$4,000/- OAP: S\$100/-								
	Exce	ess S\$100/- every claim (un	less otherw	ise stated in t	he policy schedule).				
7	Opti	ional Cover							
		on to purchase Loss of Use							
	1.	(cap @ S\$50 X 5 days per p	olicy poriod	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	D. 9¢50/				
	(cap @ S\$50 X 10 days per policy period) AP: S\$75/- (cap @ S\$100 X 5 days per policy period) AP: S\$100/- (cap @ S\$100 X 10 days per policy period) AP: S\$150/-								
			n policy por	ou) 🔾 /					
	2.	Buy Down Excess		\bigcirc \land	D- C¢27 F0/				
		Buy down \$250 Buy down \$500		_					
		Buy down \$750							
		•							
Buy down \$1,000									
		Buy down \$1,500		_					
		-		_					
	3. (Total	Protection Packageloss protection, Loan Protection, SOS Er				s \$\$50 000)			
	(iotal	1033 protection, Loan Frotection, 505 Er	nergency Evacua	mon and Feisonal AC	Concent to insuled incleased to	J J4JU,UUU)			

Add	itional Informat	ion					
1.	, ,	named drivers been involved in any motor actifyes, please give details:	cident for the past 3 years?				
	Date	Description of A	ccident	Claim Amount (S\$)			
2.	Have you or you motor car?	r named drivers been convicted of or receive	d notice of intended prosecution for	or any offence in connection with			
	○ No ○ Yes	If yes, please give details:					
3.	Do you have NCI	O to be transferred from another Insurer?					
0.		If yes, please provide below details :					
Pres	ent/Previous Insur	er:	NCD:	Vehicle No:			
Polic	cy No:		Expiry Date:				
Pay	ment Before C	over Warranty (For Vehicles Registered Under Perso	onal Name)				
1.	due must be paid	anything herein contained but subject to claus and actually received in full by the Company Renewal Certificate, Cover Note or Endorsen	on or before the inception date ("the				
2.	In the event that referred to above and no benefits w	the total premium due is not paid and actua, then the Policy, Renewal Certificate, Cover Natsoever shall be payable by the Company. If the Policy, Renewal Certificate, Cover Note	lly received in full by the Company Note and Endorsement shall be dee Any payment received thereafter sh	med to be cancelled immediately			
Pre	mium Payment	Warranty (For Vehicles Registered Under Company's N	lame)				
1.		anything herein contained but subject to clau ays or more, any premium due must be paid a					
		te of the coverage under the Policy, Renewal e of each Endorsement, if any, issued under t		over Note.			
2.	In the event that above, then:-	any premium due is not paid and actually re	eceived in full by the Company with	nin the 60-day period referred to			
	(a) the cover under the Policy, Renewal Certificate, Cover Note or Endorsement shall be deemed to be cancelled immediately after the expiry of the said 60-day period;						
	 (b) the deemed cancellation of the cover shall be without prejudice to any liability incurred within the said 60-day period; and (c) the Company shall be entitled to a pro-rate time on risk premium subject to a minimum of \$\$50.00 						
3.	If the period of In the period of insu	surance is less than 60 days, any premium d rance.	ue must be paid and actually receiv	ed in full by the Company within			
Dec	laration						
1.	I / We agree to a above mentioned are true and corre	eclare and agree to insure my Motor Vehicle ccept the Company's Policy subject to the proposed to the proposed and Declaration shall for that the Policy issued may be rendered void	ovisions and conditions of the Polic lition. I / We hereby warrant that all t m part of the contract between the	by I / We hereby declare that the he answers given in this proposal			
2.	I / We hereby undertake to reimburse the Company on any difference on Premium due to different NCD percentage stated herein from the NCD percentage declared by my / our previous insurer and also difference on Premium due to non-declaration of accidents from my / our previous insurance company.						
3.	I / We understand that if I / we opt for the AutoSafe Scheme, in the event of an accident / windscreen damage, I / we MUST sent my / our motor vehicle to CTPIS authorised workshops for all repairs.						
4.	I / We understand that if my / our vehicle is a parallel imported model, in the event of an accidental windscreen damage or damage to the vehicle / accessories and if the parts are not obtainable from our local workshops, the Insured shall be responsible for all costs including air freight and storage charges due to the delay in repair to his / her vehicle.						
Date			Signature of Proposer / Company Stamp				

10

11

Personal Data Collection Statement

1. Consent to Privacy Policy

I / We further confirm that I / we have read and understood and hereby consent to the collection, use, disclosure and processing of my / our personal data in accordance with and agree to be bound by China Taiping Insurance (Singapore) Pte. Ltd. ("CTPIS") Privacy Policy which is made available on our website at www.sq.cntaiping.com/en/privacypolicy, as may be amended from time to time.

I / We agree on my / our behalf and on behalf of every insured person that in addition to the release of information to any other entity mentioned in this Application Form, CTPIS is authorised to collect, retain, use and / or disclose as it reasonably deems fit, any information in respect of me / us / any insured person, that is received by CTPIS to its Representatives and relevant third parties, companies within China Taiping Insurance Group, reinsurers, medical organisations, my / our adviser, financial institutions, CPF agent banks, credit agencies, investigators, service providers (who may have to disclose my / our data to their service providers), judicial, regulatory, government, statutory authorities, dispute resolution parties and industry entities) whether within or outside Singapore. As far as reasonably possible, CTPIS will release such information to such parties on the understanding that the information will be kept strictly confidential and be used, disclosed and retained in accordance with relevant law.

2. Say YES to be a China Taiping SG savvy customer! - MARKETING CONSENT

I / We would like to receive first-hand information about CTPIS's products, latest promotions, financial tips and news, and I / we consent to receive such marketing updates from CTPIS and its service providers via:

SMS and other phone-based messages Voice call

I / We hereby represent and warrant that I / we am / are the user(s) and / or subscriber(s) of the telephone number provided by me / us in this form or other forms submitted to CTPIS and I / we consent for CTPIS and its service providers to contact me / us. For the avoidance of doubt, where my / our telephone number is a Singapore telephone number, I / we confirm that the foregoing consent applies even though my / our telephone number(s) is / are already registered or may be registered on the National Do Not Call Registry.

I / We confirm that:

- I / We have read and understood the provisions in this form;
- the consent that I / we have provided in this form is in addition to, and does not supersede, vary or nullify the consent which I / we have provided previously unless my / our consent is withdrawn through the withdrawal form at: https://bit.ly/marketingconsent.
- I / We understand that I / we may withdraw my / our consent through the withdrawal form at any time.

I have read and agree to the above.
Name:
NRIC No:
Date