

PRIVATE VEHICLE - MOTOR INSURANCE PROPOSAL FORM

Policy No.		Agent/Broker:	Agent/Broker Code:

Under Section 25(5) of the Insurance Act (Cap 142), 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.
- 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"). 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/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. / Company Reg.No.		Date of Birth (dd/mm/yyyy)	
		<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Marital Status		Gender	
<input type="radio"/> Single <input type="radio"/> Married		<input type="radio"/> Male <input type="radio"/> Female	
Nationality			
<input type="radio"/> Singaporean <input type="radio"/> Singaporean PR <input type="radio"/> Others, please specify:			
Address			
Postal Code:			
Contact Details			
Home No.:	Office No.:	Mobile No. (Mandatory):	Email Address (Mandatory):
Date of obtaining Singapore Driving License		Occupation / Business	
Details of Vehicle			
Registration No	Make & Model	Year of Make	Registration Date
Engine No	Chassis No	C.C. / Tonnage	Seating Capacity
Type of Vehicle (Tick one)	<input type="radio"/> Saloon <input type="radio"/> Hatchback <input type="radio"/> Stationwagon <input type="radio"/> SUV <input type="radio"/> MPV <input type="radio"/> Roadster <input type="radio"/> Jeep <input type="radio"/> Coupe / Convertible / Cabriolet		
Type of Vehicle (Tick all that is applicable)	<input type="radio"/> Off Peak Car <input type="radio"/> Parallel Import Models* <input type="radio"/> Modified Vehicle (Decline)		
Hire Purchase Company			

*Refer to Declaration section on Page 3 for more information

Coverage Required

Period of Cover	From _____ to _____ (To coincide with Road Tax expiry date if possible)
Type of Cover	<input type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> Third Party Only For Comprehensive and Third Party Fire & Theft, coverage is based on market value at the time of loss. AutoSafe Scheme <input type="radio"/> Yes <input type="radio"/> No Applicable to Comprehensive Coverage only. Refer to Declaration section on Page 3 for more information.

Vehicle Usage

Private Car	(a) Will the vehicle be used for hire or reward? <input type="radio"/> Yes <input type="radio"/> No (b) Will the vehicle be used for carriage of passengers for hire or reward? <input type="radio"/> Yes <input type="radio"/> No (c) How often do you drive in to Malaysia?
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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 experience

Name of Driver	D.O.B	Driving Experience	NRIC No.	Sex	Marital Status	Occupation

Insured and Named Drivers enjoy one-time excess waiver (up to S\$500 for non-continental cars and up to S\$1,000 for continental cars) in the event of an Own Damage Claim lodged at our Authorised Workshops.

Unnamed Driver Additional Excess:

*Age / Driving Experience	Add. Excess
≤ 25	S\$3,000
≥ 26	S\$500
< 1 year driving experience**	S\$3,500

*Age as at date of accident
 **S\$3,500 is the maximum excess applicable for young and inexperienced drivers unless otherwise specified in the policy schedule.

Windscreen Replacement (Automatic Reinstatement)

1. Replace at any Authorised Distributor Workshops (within warranty period - maximum 3 years) unlimited
2. Replace at any of our Authorised Workshops unlimited
3. Other than the above S\$300
4. Option to increase coverage at Non-Authorised Workshops
 up to S\$1,000/- AP: S\$50/-
 up to S\$2,000/- AP: S\$100/-

Excess S\$100/- every claim (unless otherwise stated in the policy schedule).

Optional Cover

- Option to purchase
1. Loss of Use (cap @ S\$50 x 5 days per policy period) AP: S\$50/-
 2. Protection Package AP: S\$150/-
- (Total loss protection, Loan Protection, SOS Emergency Evacuation and Personal Accident to insured increased to S\$50,000)

Additional Information

1. Have you or any of the named drivers been involved in any motor accident for the past 3 years?
 No Yes If yes, please give details:

Date	Description of Accident	Claim Amount (S\$)

2. Have you or any of the named drivers been convicted of or received notice of intended prosecution for any offence in connection with motor car?
 No Yes If yes, please give details:

3. Do you have NCD to be transferred from another Insurer?
 No Yes If yes, please provide below details :

Present/Previous Insurer: NCD: Vehicle No:

Policy No: Expiry Date:

CTPIS/LIFE/SI/M/082019

Payment Before Cover Warranty (For Vehicles Registered Under Personal Name)

1. Notwithstanding anything herein contained but subject to clause 2 hereof, it is hereby agreed and declared that the total premium due must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) on or before the inception date ("the inception date") of the coverage under the Policy, Renewal Certificate, Cover Note or Endorsement.
2. In the event that the total premium due is not paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) on or before the inception date referred to above, then the Policy, Renewal Certificate, Cover Note and Endorsement shall be deemed to be cancelled immediately and no benefits whatsoever shall be payable by the Company. Any payment received thereafter shall be of no effect whatsoever on the cancellation of the Policy, Renewal Certificate, Cover Note and Endorsement.

Premium Payment Warranty (For Vehicles Registered Under Company's Name)

1. Notwithstanding anything herein contained but subject to clause 2 hereof, it is hereby agreed and declared that if the period of insurance is 60 days or more, any premium due must be paid and actually received in full by the Company (or the intermediary through whom the Policy was effected) within 60 days of the:-
 - (a) inception date of the coverage under the Policy, Renewal Certificate or Cover Note; or
 - (b) effective date of each Endorsement, if any, issued under the Policy, Renewal Certificate or Cover Note.
2. In the event that any premium due is not paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) within the 60-day period referred to above, then:-
 - (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 S\$50.00
3. If the period of Insurance is less than 60 days, any premium due must be paid and actually received in full by the Company (or the intermediary through whom this policy was effected) within the period of insurance.

Declaration

1. I / We hereby declare and agree to insure my Motor Vehicle with China Taiping Insurance (Singapore) Pte. Ltd. ("CTPIS"). and I / We agree to accept the Company's Policy subject to the provisions and conditions of the Policy. I / We hereby declare that the above mentioned Motor Vehicle is and will be kept in good condition. I / We hereby warrant that all the answers given in this proposal are true and correct, that this proposal and Declaration shall form part of the contract between the Company and myself. Otherwise, I / We understand that the Policy issued may be rendered void.
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
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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.sg.cntaiping.com/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 authorized 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. Marketing Consent (please tick the relevant boxes to indicate consent)

I / We hereby consent to CTPIS (including Representatives of China Taiping), China Taiping group of companies and their service providers to contact me / us (even though my / our telephone number(s) are already registered or may be registered on the National Do Not Call Registry), by way of:

- Voice Mail
- Mail / Email / Any other avenues of marketing activities
- SMS

I / We am / are aware that the consent provided by me / us in this form is an addition to and does not supersede, vary or qualify any consent which I / we may have provided previously in respect of the above purposes, unless my / our consent is withdrawn through the withdrawal form.

I have read and agree to the above.

Name:

NRIC No:

Date: