

TM Business Suite

Bespoke Insurance Solutions



Proposal Form

Statement pursuant to Section 25(5) of the Insurance Act, Singapore (Cap. 142), and any future amendments to it: You are to disclose in this proposal form fully and faithfully all facts, which you know or ought to know, otherwise the policy issued hereunder may be void.

Please select your TM Business Suite

Suite Date

Period of Insurance (Strictly No Backdating) From: To:

Selection	Coverage	Classic Suite	Max Sum Insured / LOL / Insured Persons	Top-up Rates	Additional Sum Insured / LOL / Insured Persons	Additional Premium
Section 1 to 6 are included in your TM Business Suite	Section 1: Property All Risks Covers your Renovations, Contents and Stock-in-Trade in the event of accidental loss or damage The following deductibles are applicable: i) \$250 Each and every loss except for fire, lightning and explosion ii) \$500 Each and every loss in respect of water damage	\$100,000	\$1,500,000	0.000%		\$0.00
	Section 2: Business Interruption Provides you with daily cash during business interruption (Up to 100 Days @ 1%/Day)	\$25,000	\$35,000	0.000%		\$0.00
	Section 3: Money Reimburses you for theft of money for: a) Money In Transit b) Money In Premises during Business Hours c) Money In Premises after Business Hours d) Money in Personal Custody	\$5,000 \$5,000 \$2,500 \$2,500	\$20,000 \$20,000	0.00% 0.00%		\$0.00 \$0.00
	Section 4: Personal Accident Comprehensive Personal Accident benefits for 2 Owners/Partners	\$30,000 Per Insured Person	Not Applicable			
	Section 5: Public Liability Protects you from legal liability to third parties in connection with the Business The following deductibles are applicable: i) \$250 Each and every claim in respect of all others ii) \$500 Each and every claim in respect of water damage	\$500,000	\$3,000,000	0.000000%		\$0.00
	Section 6: Work Injury Compensation Act Insurance Fulfills your statutory liability to your employees in the event of bodily injury / death in the course of employment Declaration Basis (Please Select One): Unnamed Basis - All employees, including non-manual employees earning more than \$1,600 per month must be covered, if not average will apply Named Basis - Only those employees named in the policy schedule will be covered	3	20	\$0		\$0.00
	Section 7: Fidelity Guarantee Indemnifies you for misappropriation of money by employees up to \$5,000 in the aggregate	Not Applicable	20	\$0		\$0.00

Additional Premium \$0

Suite Selections			
Bespoke Extensions	Limit of	Selection	Each extension @
1) Hospital Cash for the insured person under the Personal Accident Section up to 14 days	\$1,400 Per Insured Person		Number of Extensions \$15 No. Of Ext. 0
2) Deterioration of Stock (For Dining Suite only)	\$2,000		
3) Goods in Transit	\$2,000		
5) Rental Expenses	\$20,000		
6) Self-Store Contents	\$5,000		

Additional Premium \$0

Total Basic Premium	\$0.00
Total Additional Premium	\$0.00
GST	\$0.00
Total Premium Payable Including GST	\$0.00

* Enjoy a 10% No Claim Discount off your TM Business Suite renewal premium.

** Take advantage of our 10% Chain Discount by insuring 3 or more of your branches/outlets with us.

All Renewal or Chain Discounts are subject to no claims for each outlet during the preceding 12 months.

Bespoke Insurance Solutions

TOKIO MARINE
INSURANCE GROUP

Proposer Details									
Name of Proposer:									
Business Registration Number:									
Company or Shop Name:									
Correspondence Address:								Singapore	
Business Premises Address:									
Nature of Business:									
Occupancy:	Sole Occupany			Shared Premises			Please Choose One		
Nature of Business of Neighbors if Occupancy is Shared:									
Contact Details:	Tel (O):		Fax (F):		Tel (M):				
	Email Address:								
Intermediary Details	Intermediary Name:						Intermediary Code:		

Details of Insured Person under Section 4: Personal Accident			
Name	NRIC / FIN	DOB	Occupation

[illegible]

*If you are not insuring ALL your employees, please provide details of employee(s) to be insured in this box.

[illegible]

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TOKIO MARINE
INSURANCE GROUP

Underwriting Information

- 1) Have you suffered any claims or losses for the insurances applied for in the last three years? Yes¹ No
If yes, please disclose all claims details below:

Date of Loss	Claims Description	Loss Amount

- 2) Are your employees involved in work of a hazardous nature? (e.g. Despatch Staff) Yes¹ No
If yes, please disclose the workscope of your employees:

- 3) Are your business premises located in a conservation shophouse? Yes¹ No

¹If you have answered yes to any of the above, and/or your nature of business may fall under excluded Trades/Premises, your proposal will be subject to underwriting review and approval.

Please review the following important statements for your consent.

I/We declare that:

- The answers provided in this Proposal Form are true;
- All material facts about the risk have been disclosed;
- The premises are of hard roof and concrete wall construction;
- These proposed insurances have never been declined, cancelled mid-term or been subject to special requirements by any insurance company;
- I/We undertake to inform you of any alteration to the risks proposed and to exercise all reasonable precautions for the safety of the Property insured;
- The insured person under Section 4 - Personal Accident is in good health and is not suffering from any physical infirmity;
- I/We acknowledge that for WICA Insurance, the following declaration options and conditions will apply:
 - If employees are declared on an unnamed basis, all employees for the Business, including those earning more than \$1,600 per month, must be covered, if not I/We will be deemed to be our own insurer in proportion to the shortfall in the total number of employees declared, and will bear a rateable proportion of liability in the event of a claim.
- Or;
- If employees are declared on a named basis, only those named in the policy schedule will be covered.
- I/We acknowledge that this policy is subject to 60 days premium payment warranty;
- I/We acknowledge that all figures shown are in Singapore Dollars;
- I/We acknowledge and consent to TMIS collecting, using, processing and disclosing to third party service providers and/or intermediaries, within or outside Singapore, my/our personal data for the purpose of processing and servicing my/our policies/claims;
- I/We declare and confirm that I/We have obtained the consent of the person(s) and/or nominee(s) named herein, and that the person(s) and/or nominee(s) has/have authorized me/us to disclose their personal data and to give consent on their behalf for the above collection, use, processing and disclosure; and
- I/We acknowledge the detailed Privacy Policy Statement, governing the above, posted at www.tokiomarine.com.

Yes, I agree

No, I do not agree

*By ticking "Yes, I agree", this proposal is validated by the insured in lieu of a signature.

Mode of Payment	
By Cash	Please make payment to your intermediary or our customer service counter
By Cheque	Bank: <input type="text"/> Cheque No.: <input type="text"/> Payee Name: Tokio Marine Insurance Singapore Ltd.
By Credit Card	Name on card: <input type="text"/> Credit Card No.: <input type="text"/> Expiry Date: <input type="text"/> Please indicate: <input type="text"/> Mastercard <input type="text"/> Visa

Please note the following:

- This proposal form does not constitute a contract of insurance.
- All terms, conditions, limits, excesses as per Tokio Marine Insurance Singapore Ltd. policy wording. Please refer to your policy wording and schedule.
- This risk is not bound until all required information is submitted to Tokio Marine Insurance Singapore Ltd.