



ace insurance

ACE Insurance Limited
600 North Bridge Road
#04-02 Parkview Square
Singapore 188778

(65) 6398 8000 tel
(65) 6298 1055 fax

www.aceinsurance.com.sg

elite Public Offering of Securities Insurance Proposal Form

Important Notices to the Applicant

Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty under the law to disclose to the insurer every matter within your knowledge that is material to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance.

It is important that all information contained in this application is understood by you and is correct, as you will be bound by your answers and by the information provided by you in this application. You should obtain advice before you sign this application if you do not properly understand any part of it.

Your duty of disclosure continues after the application has been completed up until the contract of insurance is entered into.

Non-Disclosure

If you fail to comply with your duty of disclosure, the insurer may have the option of avoiding the contract of insurance from its beginning.

If your non-disclosure is fraudulent, the insurer may also have the right to keep the premium that you have paid.

Change of Risk or Circumstances

You should advise ACE as soon as practicable of any change to your normal business as disclosed in this application, such as changes in business activities, location, acquisitions and new overseas activities.

Subrogation

Where you have agreed with another person or company (who would otherwise be liable to compensate you for any loss or damage which is covered by the contract of insurance) that you will not seek to recover such loss or damage from that person, ACE will not cover you, to the extent permitted by law, for such loss or damage.



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Instructions to the Applicant

- A. Please type or print answers clearly.
- B. Answer **all** questions completely, leaving no blanks. If any questions, or part thereof, do not apply, type or print "N/A" in the space.
- C. Provide any supporting information on a separate sheet using your Company's letterhead and reference the applicable question number.
- D. Check Yes or No answers.
- E. This form must be completed, dated and signed by **two authorized officers** of your Company.
- F. If you have any questions concerning this proposal, please contact your insurance broker or adviser to discuss.

Details of Applicant

1.	Name of Company	
2.	Address of registered office	
	City	
	Country	
	Company website URL	www.
3.	How long has the Company continually carried on business?	years
4.	Are any of the Company's subsidiaries publicly traded?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, please give	
	<u>Subsidiary</u>	<u>Name of exchange</u>



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5.	Are any existing shareholders selling shares?		Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, please give:		
	<u>Shareholder</u>	<u>% being sold</u>	<u>% being retained</u>
		%	%
		%	%
		%	%
		%	%
		%	%
6.	Please provide details of any shareholder (directly or beneficially) owning 10% or more of the Company's voting shares:		
(i)	prior to the offering		
	<u>Shareholder</u>	<u>% of the Company's voting shares</u>	
		%	
		%	
		%	
		%	
(ii)	after the offering		
	<u>Shareholder</u>	<u>% of the Company's voting shares</u>	
		%	
		%	
		%	
		%	
7.	What percentage of the Company's securities will be subject to free float?		%



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8.	Please provide the following details with respect to the offering for which insurance is sought (as applicable):		
(i)	type of offering (listing, placing, etc.)		
(ii)	exchange(s) involved		
(iii)	amount being raised	SGD/USD	
(iv)	percentage of securities offered in the USA other than under Rule 144A	%	
(v)	percentage of securities to be offered under Rule 144A	%	
(vi)	estimated market capitalisation post offering	SGD/USD	
(vii)	road show dates and venue		
	<u>Dates</u>	<u>Venue</u>	
		Singapore	
		USA	
		UK	
9.	With respect to the proposed insurance or any previous offering of securities or D&O insurance:		
(i)	has there been or is there now pending any claim against the Company (including its subsidiaries) or any director, officer or employee thereof?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
(ii)	does the Company (including its subsidiaries) have any knowledge of any circumstances which could give rise to a claim under the proposed policy?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
	If Yes, please give full details on a separate sheet on the Company's letterhead.		
10.	Please provide details of any directors and officers liability policy in place, as follows:		
(i)	Insurer		
(ii)	Limit of Liability	SGD/USD	
(iii)	Policy Period		
(iv)	Premium	SGDD/USD	
11.	Has the Company ever had an Insurer decline a proposal or cancel or refuse to renew a Directors and Officers liability insurance?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
	If Yes, please give full details on a separate sheet on the Company's letterhead.		



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Additional Information to Send with Your Application

Attach a copy of the following:

Included?

Final offer documents/listing particulars in relation to the offering of securities for which insurance is sought

Yes ☐ No ☐

All related offer documents/listing particulars (including any USA SEC registration statements) filed within the last 12 months

Yes ☐ No ☐

Underwriting Agreement

Yes ☐ No ☐

Declaration

- We have read and understood the Important Notices contained in this application.
- We agree that this proposal, together with any other information or documents supplied, will form the basis of any contract of insurance.
- We acknowledge that if this application is accepted, the contract of insurance will be subject to the terms and conditions as set out in the policy wording as issued or as otherwise specifically varied in writing by ACE.
- We declare, **after inquiry**, that the statements, particulars and information contained in this application and in any documents accompanying this application are true and correct in every detail and that no other material facts have been misstated, suppressed or omitted.
- We undertake to inform ACE of any material alteration to those facts before completion of the contract of insurance.

Section 25(5) of the Insurance Act - Statutory Warning

If you do not fully and faithfully give the facts as you know them or ought to know them, you may receive no benefits from the policy.

This form **must** be reviewed, signed and dated by two duly authorised officers.

Signed, Chairperson:

Date:

Signed, Managing Director or Chief Executive Officer:

Date: