

MSIG Insurance (Singapore) Pte. Ltd.

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Co. Reg. No. 200412212G GST Reg. No. 20-0412212G msig.com.sg

A Member of MS&AD INSURANCE GROUP

Enhanced Home Plus® Application Form

The Insurance Act: In this Application Form, you are required to disclose fully and faithfully all the facts you know or ought to know in respect of the risk that is being proposed; otherwise, the Policy issued hereunder may be void.

Please ${\bf extstyle 1}$ tick where appropriate.

| (A) Particulars of Applicant | | | | | | |
|---|---|---------------------|---------------------|---------------------|------------------------|--------------------------|
| Name Mr/Mrs/Ms/Mdm/Dr* | ame as in your NRIC/F | IN/Passport. Please | underline surname.) | | Gender [|] Male 🗌 Femal |
| Residential Address | , | | · | | Postal Code | |
| If your mailing address above is different from the exi | | | | | | |
| NRIC/FIN/Passport No | | | | | | |
| (Please provide NRIC No. if Applicant is a Singapored | | INC | icionalicy | Occu | расіоп | |
| Marital Status 🗌 Single 🗌 Married 📗 | Others Race | ☐ Chinese ☐ | Malay 🗌 India | n Others | (please | specify) |
| Tel (Home) | | (HP) Email _ | | | • | |
| (B) Period of Insurance | | | | | | |
| | | | | | | |
| From | | to _ | | | | |
| (C) Details of Your Home to be In: | sured | | | | | |
| Address | | | | | | |
| Type of Property | e Anartment | Landed property | ☐ HDB 5- | Room and above | | |
| ☐ HDB 3/4-Room Flat | . = | Others (please sp | _ | | | |
| Is Your Home Occupied | _ | Rented to you | • • | Occupied 🔲 l | Jnoccupied-See r | emarks below |
| Remarks - Please contact | us if the property | is currently unoc | cupied. | | | |
| (D) Choice of Plan | | | | | | |
| (b) choice of Ftail | | | | | | Currency: Singapore doll |
| | | | | | Premium inclusive of G | |
| (| Standa | ord Plan | Superi | or Plan | Ultimate Plan | |
| | Sum Insured | Annual Premium | Sum Insured | Annual Premium | Sum Insured | Annual Premium |
| Please tick your choice of Plan | As per Plan | \$120.99 | As per Plan | \$179.85 | As per Plan | \$237.62 |
| Optional Cover | | | | | | |
| | \$ | \$ | \$ | \$ | \$ | \$ |
| 1. Building: \$4.36 per \$10,000 Sum Insured Minimum \$50,000 | If you have a mortgage, please advise name of Bank/Financier: | | | | | |
| | If your building is | registered as a Man | agement Corporatio | on property, please | provide MCST No.: _ | |
| Additional Cover | | | | | | |
| 2. Contents: \$16.35 per \$10,000 Sum Insured Minimum \$10,000 | Not Ap | plicable | Not Applicable | | \$ | \$ |
| 3. Renovations: \$4.36 per \$10,000 Sum Insured Minimum \$10,000 | Not Ap | plicable | Not Applicable | | \$ | \$ |
| Total Annual Premium (including Optional/Additional Cover, if any) | | \$ | | \$ | | \$ |

| (E) | General Information | | | | | | |
|------------|--|---|---|------------|--|--|--|
| Hav | e you or has any member of your family living | with you: | | | | | |
| | ver been refused cover, or imposed special ter nd/or its contents? | rms by any insurance company on insurance re | lating to the property to be insured | ☐ No ☐ Yes | | | |
| ii. h | ad any property from the address to be insure | ed stolen, lost or damaged in the last 3 years? | | ☐ No ☐ Yes | | | |
| iii.h | ad any claim in respect of the residential home | e and/or home contents made against you/the | em in the last 3 years? | ☐ No ☐ Yes | | | |
| If ar | nswer is Yes to any of the above questions, ple | ase provide details below: | | | | | |
| (F) | Premium Payment | | | | | | |
| Plea | sse charge S\$to my Visa | a/MasterCard Credit Card* no |]- | - | | | |
| Nan | ne of Bank Name | e on Credit Card | Card Expiry Date | / | | | |
| *No | te: Credit card payment is acceptable for persor | nal application only | m m | у у у у | | | |
| This | credit card | | | | | | |
| | pelongs to the Insured | | | | | | |
| | pelongs to someone other than the Insured | | | | | | |
| Plea | se state relationship to Insured | | | | | | |
| | Signature of Cardholder | | Date | | | | |
| 10 | | - (-) | Juli | | | | |
| |) Preference For Receiving Updates | | | | | | |
| | | insurance products and promotions via SMS an | | | | | |
| <u></u> | No, I do not wish to receive updates from MSI | G on insurance products and promotions via SI | MS and/or phone calls. | | | | |
| (H |) Declaration | | | | | | |
| l wa | nt to effect the insurance specified here and o | declare that I: | | | | | |
| i) | warrant that the information given and answers to questions in this Application are true and correct to the best of my knowledge and have not withheld any facts likely to influence MSIG Insurance (Singapore) Pte. Ltd.'s assessment of this Application. | | | | | | |
| ii) | understand that the personal accident bene | fits of this insurance will only be payable upor | n an accident occurring. | | | | |
| iii) | | usions, conditions, clauses and warranties con any other information provided shall form the | es contained in the Policy and as modified or extended and m the basis of the contract. | | | | |
| iv) | | this Application will be subject to the approval and acceptance by MSIG Insurance (Singapore) Pte. Ltd. and the premium fully paid d by the Company before cover can be effected. | | | | | |
| v) | understand and accept that my personal particulars will be collected, used and disclosed by MSIG in accordance with the Personal Data Protection Act 2012 and MSIG's Privacy & Cookies Policy, for the provision of all services related to, and protection under, this insurance policy, including for proper servicing, underwriting and claims administration. MSIG may also send me marketing mailers by post or emails. MSIG may disclose my personal particulars to its business partners and third party service providers for these purposes. Where there are more than one individual insured persons, I confirm they have consented to MSIG's collection, use and disclosure of their personal particulars. Please refer to the full MSIG's Privacy & Cookies Policy for more information. | | | | | | |
| | Signature of Applicant | Date | Agent/Broker Stamp | | | | |

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation. For more information on the scheme, please visit www.gia.org.sg or www.sdic.org.sg