



Statement pursuant to Section 25(5) of the Insurance Act (Cap 142) or any amendments thereof; You are to disclose in this application, fully and faithfully, all the facts which you know or ought to know, otherwise the policy issued may be void and you may receive nothing from the policy.

PROPOSER'S PARTICULARS

Yes, we would like to enrol for Corporate Assist Plan

Name of Company: _____
 Nature of Business: _____
 Address: _____
 Contact Person (Name): _____ Tel (Office): _____
 Tel (Mobile): _____ Fax: _____ Email: _____
 Total Number of Employees: _____ Effective Date of Cover (Subject to AIG's approval): _____ (dd/mm/yy)

ANNUAL PLAN – Please fill in and/or tick appropriate boxes (IN BLOCK LETTERS)

No.	Name of Employees (As it appears in Passport/NRIC)	Designation/ Classification	Date of Birth DD/MM/YY	Type of Plan			Coverage/Area				Incl. Leisure	Country Based In*	Annual Premium (S\$)
				1	2	3	Basic		Comprehensive				
							Regl.	Int'l	Regl.	Int'l			
1.													
2.													
3.													
4.													
5.													

*Please contact our underwriter if insured member(s) is/are not based in Singapore. If the space provided is insufficient, please attach a separate sheet.

CLAIMS HISTORY – Please tick appropriate boxes

- I/We declare no claims for the last 3 years.
 I/We declare claims for the last 3 years. (Please provide Claims details on a separate sheet)

PAYMENT – Total Premium payable: \$

By cheque to:
AIG Asia Pacific Insurance Pte. Ltd.
 Cheque No.: _____
 Bank: _____

DECLARATION AND AUTHORIZATION

It is hereby acknowledged that by signing this application form,

- I/We declare and warrant that declarations and disclosures herein are true and shall form the basis of the contract of insurance
- By submitting information to AIG relating to any identifiable individual, you represent and warrant that you have the authority to provide that personal information to AIG. With respect to any individual about whom you provide personal information to AIG, you undertake and warrant that:
 - you have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed or transferred by AIG, as set out in the consent clause contained at (ii) below; and
 - the individual agrees and consents that AIG may collect, use and process his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such personal information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental/regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:
 - Processing, underwriting, administering and managing his/her relationship with AIG;
 - Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
 - Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
 - Managing AIG's infrastructure and business operations; and
 - Carrying out market research and analysis and satisfaction surveys.

Note: Please refer the individual to the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sq-privacy_1030_237853.html before you provide the above representation and warranty.

- (3) I/We hereby declare that I/we have received, read and understood, or have been advised of and understand, the contents of the brochure and any information material relating to this insurance product.

Name of Proposer: _____
 Designation: _____

IMPORTANT NOTE

- A minimum of 5 employees are required to enrol for the plan.
- Please note that all policies, renewal certificates, endorsement for policies carry a Premium Warranty Clause which requires the premium to be paid in full within 60 days or period of cover whichever is shorter, failing which, there would be no liability under the policy, renewal certificate, cover note and endorsements etc.
- No insurance is in force until this application is accepted by the Company.**
- Policy is subjected to \$10 million coverage per conveyance.
- Maximum length of each business trip is 120 days.
- This plan is applicable for standard class 1&2 risk occupation only.

Signature of Proposer & Company Stamp

AGENT/BROKER DETAILS

Name: _____
 Code: _____
 Tel/Hp: _____
 Email: _____

AIG Asia Pacific Insurance Pte. Ltd.
 AIG Building
 78 Shenton Way #09-16
 Singapore 079120
 www.aig.sg
 Co. Reg. No. 201009404M

Neither this application form nor the brochure is a contract of insurance. However, your declarations or disclosures shall form the basis of the contract of insurance. The specific terms, conditions and exclusions applicable to this insurance are set out in the policy, a copy of which is available upon request.

PAGR506-03/20

