## Travel Prestige Proposal Form





Under Section 25(5) of the Insurance Act Cap 142 or any subsequent amendment thereof, you are to disclose in this Proposal form, fully and faithfully, all facts which you know or ought to know; otherwise, the policy issued may be void.

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<b>Details</b> of	of The Pro	oposer						
Name								
Address								
Email								
Occupation						Tel		
Period of insurance: From:					То:			
Details o	of The Tra	veller(s)						
N	NAME OF INSURED PERSON (S)				NRIC/FIN./PP NO.		DATE OF BIRTH	RELATIONSHIP TO PROPOSER
1.								
2.								
3.								
4.								
5.								
6.								
Selected	d Coverag	ge, Pls Tick	(√)					
Policy Typ	oe:	Single Trip	or		Annual Plan			
Plan Selec	cted:	Super Individual	or or		Standard Family			
Destination	on:	Asia Pacific	or		Worldwide			
Total Premium Payable (No GST required) S\$								

## Important Notes

- · The Insured Person must be domiciled in Singapore.
- · No refund is allowed for 'Single Trip' Plan once the certificate has been issued.
- · Cash / Cheque / Credit Card payment must accompany this proposal.
- · No insurance is in force until this application has been accepted by QBE.
- · Each Insured Person may purchase the QBE Travel Prestige Insurance only once for each trip.

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I/We hereby declare the statements and particulars given by me/us in this proposal form are true and nothing materially affecting the risks to be insured has been concealed by me/us. I/We also declared I am/we are not travelling contrary to the advice of a Medical Practitioner, or for the purpose of obtaining medical treatment. The Insured Person(s) is/are currently in good health, free from any physical impairment, infirmity, disability or deformity.

I/We have read and understood the Personal Information Collection Statement attached to this Proposal Form. I/We would like to receive information about goods and services of QBE SG Yes No or their affiliates via email and/or phone. Signature of Applicant: Date: (for and on behalf of person(s) to be insured) Payment Options (Please √ your choice of credit card) Cheque No. MASTERCARD VISA Card No. CVV **Expiry date:** Cardholder's Name: Signature:

## Policy Owners' Protection Scheme

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 your insurer or visit the GIA/LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

## **Personal Information Collection Statement**

In relation to the personal data collected by [QBE Insurance (Singapore) Pte. Ltd. ("QBE SG"), I/We agree and acknowledge that:

- a) the personal data requested is necessary for QBE SG to process your application for insurance or claim and any such data not provided may mean this application or claim cannot be processed;
- the personal data collected in this form may be used by QBE SG for the purposes stated in its Privacy Policy found at https://www.qbe.com/sg/privacy-policy. These include underwriting and administering the insurance policy being applied for (including obtaining reinsurance, underwriting renewals, claim processing, investigation, payment and subrogation and any related purposes);
- c) QBE SG may transfer the personal data to the following classes of persons (whether based in Singapore or overseas) for the purposes identified in (b) above:
  - i. third parties providing services related to the administration of my/our policy (including reinsurance);
  - ii. financial institutions for the purpose of processing this application and obtaining policy payments;
  - iii. in the event of a claim, loss adjustors, assessors, third party administrators, emergency providers, legal services providers, retailers, medical providers and travel carriers;
  - iv. another member of the QBE group (for all of the purposes stated in (b)) in any country; or
  - v. other parties referred to in QBE's Privacy Policy for the purposes stated therein;
- d) I/We may gain access to, or request correction of my/our personal data (in both cases, subject to a reasonable fee), via email or post at:

QBE Insurance (Singapore) Pte. Ltd.

Address: 1 Wallich Street, #35-01, Guoco Tower, Singapore 078881

Email: info.sing@gbe.com

e) that where I/We are providing personal data on behalf of another person to QBE SG, I/We have obtained consent from the other person who have agreed that their personal data will be released to QBE SG in accordance with paragraphs (a), (b) and (c) above.