## Marine Cargo Annual Policy Proposal Form





## **IMPORTANT**

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

A. Details Of Applicant					
Proposer's Name					
Address					
Email					
Web Address (if any)					
Business Activities					
Operating Since					
B. Details Of Shipment					
Details of subject matter to be insured (Please indicate if cargoes are	e New, Used or Reconditioned):				
• Import					
• Exports					
• Domestic					
Estimated Annual Turnover	Currency	Amount			
Imports (Goods bought on FOB/EX WORKS etc basis)					
Exports (Goods sold under CIF/C&F etc. basis)					
Domestic Procurement (Inland Transit)					
	Total				
Mode of Packing					
Are containers used? Yes No					
If Yes, the containers are	Others (Please specify)				
If no, please provide packing details (such as drums, bundles, cartons/crates/bags etc)					
Mode of Shipment	Approx. % of Estimated Annual	Turnover			
• Sea		%			
• Air		%			
• Road		%			
Post Parcel		%			
• Courier		%			
Others (please specify)		%			

Details	of voyage						
Type o	Transit		From (Countries/Places)			To (Countries/Places)	
Export	S						
Import	S						
Inland	transit						
Specifi	С						
Limit P	er Conveyance (M	1aximum	value shipped)				
Any O	Any One Import		Export		Inland Transit		
Truck/	Road vehicle						
Air							N.A.
Ocean	Going Vessel						N.A.
Courie	r						
Parcel	Post						
Other	(Please specify)						
	nal information, if	any rolo	vant to the propo	sed insurance			
riddicie		u.,,, reie	vane to the prope				
C. De	tails Of Existing (	Cover Ar	nd Claims				
	ur insurance cove			ny Insurer?	Yes	No	
	lease give details.		•	•			
Loss R	atio for the past 5	years					
Year	Premium	No. of	Claims	Outstanding	Loss Ratio		Underwriters
	Paid (1)	Claims	Paid (2)	Claims (3)	[(2+3)/(1)] X 100		
				<del> </del>			
Claims	Details						
	<b>Details</b> Accident	Cause o	of Loss		Claims Paid		Outstanding Claims
		Cause c	of Loss		Claims Paid		Outstanding Claims
		Cause o	of Loss		Claims Paid		Outstanding Claims
		Cause o	of Loss		Claims Paid		Outstanding Claims
		Cause o	of Loss		Claims Paid		Outstanding Claims
		Cause o	of Loss		Claims Paid		Outstanding Claims

## D. Personal Data Protection Act (PDPA) 2012

Supplementary Consent Clauses

To process, administer and/or manage your relationship, account and policy with QBE Insurance (Singapore) Pte Ltd (QBE), QBE will need to collect, use, disclose and/or process your personal data. Such personal data includes (i) information set out in this [form] and any other personal information provided by you or possessed by QBE; and (ii) your claims.

Such personal data will be collected, used, disclosed and/or processed by QBE for the purpose(s) of:

- a) considering whether to provide you with the insurance you applied for;
- b) processing your application for underwriting and insurance;
- c) administering and/or managing your relationship, account and/or policy with QBE;
- d) processing and/or dealing with any claims including the settlement of claims and any necessary investigations relating to the claims, under your policy:
- e) carrying out due diligence or other screening activities (including background checks) in accordance with legal or regulatory obligations or risk management procedures that may be required by law or that may have been put in place by QBE;
- f) carrying out your instructions or responding to any enquiries by you;
- g) dealing in any matters relating to the services and/or products you are entitled to when applying for this or other policies you applied for. This includes the disclosure of some of your personal data when mailing of correspondence, statements, invoices, reports or notices to you, as well as the disclosure of some of your personal data on the cover of envelopes/mail packages;
- h) investigating fraud, misconduct, any unlawful action or omission, whether relating to your application, your claims or any other matter relating to your policy, and whether or not there is any suspicion relating to these;
- i) compiling a claims history for the purpose of investigation and detecting fraud in present and future claims
- j) complying with applicable law in administering and managing your relationship with QBE;
- k) providing you with direct marketing communications about QBE's products and services; if you do not want to receive any direct marketing, you may withdraw your consent at any time free of charge by writing in to <a href="mailto:info.sing@qbe.com">info.sing@qbe.com</a>

We may/will also be collecting from sources other than yourself, personal data about you, for one or more of the purposes described above, and using, disclosing and/or processing such personal data for one or more of those purposes.

Your personal data may/will be disclosed by QBE to its third party service providers or agents (including its lawyers/law firms), which may be situated outside of Singapore, for one or more of the purposes described above, meaning third party service providers or agents, if engaged by QBE, will be processing your personal data for QBE.

By signing below, you:

- · consent to QBE collecting, using, disclosing and/or processing your personal data for the purposes described above;
- consent to QBE collecting personal data about you from sources other than yourself and using, disclosing and/or processing the same, for one or more of the purposes described above;
- consent to QBE disclosing your personal data to its third party service providers, or agents (including its lawyers/law firms), for the purposes described above; and
- consent to QBE transferring your personal data out of Singapore to its third party service providers, or agents where such third party service providers or agents are sited (whether in Singapore or outside of Singapore), for the purposes described above.

N	C'   (A   I'
Name	Signature of Applicant
NRIC No.	
Date	

We declare that the information and answers given in this form are misstated or suppressed any material facts that might influence the form does not bind insurers or mean we will accept this insurance but	assessment of the risk. We also understand that completion of this
Name	Position
Signed	Date
QBE Insurance (Singapore) Pte Ltd 1 Raffles Quay #29-10 South Tower Singapore 048583 Tel: (65) 6224 6633 • Fax: (65) 6533 3270 www.qbe.com.sg	Your Insurance Adviser or Broker

E. Declaration And Signature