

## **APPLICATION FOR THEFT INSURANCE (BUSINESS PREMISES)**

STATEMENT PURSUANT TO SECTION 25(5) OF INSURANCE ACT, CAP. 142 (OR ANY SUBSEQUENT AMENDMENTS THEREOF)
You must disclose all facts as you know or ought to know which may affect the insurance cover being applied for. Otherwise, the insurance policy issued may not be valid

Particulars of Proposer					
Name		mail			
Correspondence Address of Proposer		Contact No. (0) (H) (Hp) (Fax)			
Address of Premises To be Insured		nique Entity No. (UEN)			
		Type of Business/Trade			
Occupied as		Period of Insurance (dd/mm/yyyy) From To			
Details of Insurance Required					
INTEREST TO BE INSURED			AMOUNT TO BE I	INSURED	
On Stock-in-Trade			\$		
On Plant & Machinery			\$		
On Furniture, Fixtures, Fittings & Office Equipment			\$		
Others (please specify)			\$		
TOTAL			\$		
Description of the Premises and Other Particulars					
1. Construction of Walls: 🗆 Brick & Concrete 🗀 Brick &	& Timber/Corrugated iron	☐ Timber Only			
2. Construction of Roof:   Tiles/Concrete/Asbestos   Metal	Sheets	Others (Pls specif	y)		
3. Are you the sole occupier? If "No", please give details of other occupants.				☐ Yes	☐ No
4. Are there any showcases or display windows which are unprotected and/or can be opened from outside premises?				☐ Yes	□ No
5. Are the premises occupied at night?  If "No", is there a watchman, caretaker or other person(s) on the premises at night?				☐ Yes ☐ Yes	□ No
6. Will the premises be left unoccupied a) during weekends? b) for any continuous period of one week or longer?				☐ Yes	□ No
7. Is any burglar system fitted? If "Yes", please give details.				☐ Yes	□ No
					□ No
b) amount of losses?					
Have you taken any precaution to prevent another incident? If "Yes", please state what precautions have you taken?				☐ Yes	□ No
9. Are there any fire insurance held on the contents of your premises? If "Yes", please state amount and name of insurer.				Yes	∐ No
10. Do you keep stock books and sale books and are these promptly posted?				Yes	□ No
11. Has any insurer declined to insure your property? If "Yes", please give details.				☐ Yes	□ No
Declaration by Proposer					
I/We declare that the above information is true, correct and complete, and whether written by me/us or by anyone else on my/our behalf, I/we accept full responsibilty for them.  I/We have not withheld any material information. I/We agree that this proposal/application and other written statement, information or declaration made by me/us or on					
my/our behalf shall form the basis of the contract of insurance between me/us and NTUC Income.					
I/We acknowledge that the liability and the premium does not commence until this proposal/application has been accepted and the premium paid and received in full by NTUC Income.					
If a material fact is not disclosed in this proposal, any policy issued may not be valid. If you are in doubt as to whether a fact is material, you are advised to disclose it. This includes any information that you may have provided to the agent but was not included in the proposal. Please check to ensure you are fully satisfied with the information declared in this proposal.					
Signature of Proposer & Company's Stamp  Date (dd/mm/yyyy)					
For Official Use					
Adviser's Name	Adviser's Code	Date (dd/mm/yyyy)	Policy Delivery  Hand	Mail	
Remarks	Policy No.	1	Premium		