HomeSafe Easy Application Form

IMPORTANT NOTICE TO THE APPLICANT(S)

1. Under Section 25(5) of the Insurance Act (Cap. 142), or any subsequent amendments thereof, you have to disclose to the Insurer in this Application Form, fully and faithfully, all the facts which you know or ought to know. Otherwise the Policy issued thereafter may be void.
2. All questions in this Application Form must be answered before this Application can be considered. Any questions not answered will be taken as answered in the negative.

COVER DETAILS

Period of Insurance

From _____ To _____

Coverage

☐ Plan 1 ☐ Plan 2 ☐ Plan 3

PARTICULARS OF APPLICANT

Name

NRIC/Passport/FIN No.

Correspondence Address

Postal Code ( )

Address of property to be insured (if different from above)

Postal Code ( )

Contact Details

(Home) (Office) (Mobile)

DECLARATION BY APPLICANT

Please declare items which exceed S$3,000 in value and attach supporting receipts wherever possible

Item Description	Value (S$)

**Please declare on separate page if necessary*

Do you have any other insurance(existing and/or previous) on the same property that will be insured under this application? ☐ Yes ☐ No

If yes, please provide details of any claims or losses incurred in the last 3 years:

_____

Payment Details

Total Annual Premium Payable (S$)			
Basic Plan (A)	***Top-up Option** (B)	**GST** C = (A+B) x 7%	**Total Premium** (A+B+C)

**S$2 for every S$1,000 sum insured, max S$500,000*

☐ By Cheque Cheque No. : _____ Bank : _____

(Cheque to be made payable to AICS)

☐ Credit Card *(VISA/MasterCard)*

Expiry Date : _____ / _____ *(MM/YYYY)* Card No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Name of Cardholder : _____ CVV Code ☐☐☐

Signature of Cardholder : _____

I/We hereby declare and agree to insure my/our HomeSafe Easy Insurance with Allianz Insurance Company of Singapore Pte Ltd and I/We agree to accept the Company's Policy subject to the provisions and conditions of the Policy. I/We hereby warrant that all the answers given in this Application From are true and correct, that this Application Form and Declaration shall form part of the contract between the Company and myself/ourselves.

Signature of Applicant: Date:

_____ _____

FOR OFFICIAL USE		
Intermediary Name	Intermediary Code	Cover Note / Policy Number