

## MOBILESAFE INSURANCE PROPOSAL FORM

The issuance and acceptance of this Proposal Form is not in itself an acceptance of insurance coverage. Please return the completed Proposal Form together with supporting documents to:

**Allianz Insurance Company of Singapore Pte Ltd**  
**3 Temasek Avenue, #03-01 Centennial Tower, Singapore 039190, Tel. (65) 6-297-2529, Fax (65) 6-395-3767**

<b>APPLICANT'S PERSONAL DETAILS</b>	Full Name. <u>Mr / Ms / Dr / Mrs / Prof</u> Address. _____ Date of Birth. _____ Email. _____ Mobile no. _____ Occupation. _____ Home no. _____ Office no. _____			
<b>ITEMS TO BE COVERED</b>	<b>PRODUCT INFORMATION</b> <span style="float: right;">N.B. Items without a serial number cannot be covered</span>			
	Description of Mobile Equipment to be covered	Serial Number	Date of Purchase	Purchase Price
	1.			
	2.			
	3.			
	4.			
	5.			
	6.			
	7.			
	8.			
	9.			
	10.			
	Total Amount (Including GST)			S\$
<b>DOCUMENTS REQUIRED</b>	To facilitate Insurer in considering your application, please ensure that you submit <b>all</b> the following documents with this completed Proposal Form : Copy of the original invoice and receipt with the applicant's name, product description, date of purchase, serial number and price clearly printed. Note: The Insurer reserves its rights to inspect the Mobile Equipment and its external peripheral devices to be covered before acceptance of cover.			
<b>APPLICANT'S DECLARATION</b>	I hereby declare that to the best of my knowledge and belief, the statements and answers in this form are true and correct in every respect. I also declare that I have not withheld any material information and that all the items named above are in perfect working condition and not damaged or defective in any way.  <div style="display: flex; justify-content: space-between;"> <span>Date: _____</span> <span>Applicant's Signature _____</span> </div> <div style="display: flex; justify-content: space-between;"> <span>NRIC No: _____</span> </div>			

**Note.** Under Section 24(4) of the Insurance Act (Chap.142), you are to disclose in this proposal form all the facts, which you know or ought to know, otherwise the Policy issued hereunder may be void.

**Mobile Equipment that can be covered:**

Laptop or Notebook computer and its recommended/approved external peripherals such as DVD-ROM, CD-ROM, CD Writer, MO Drive, Floppy Drive, Docking Station, Modem, Network Card, Bluetooth Device, Portable Notebook/Laptop Printer and LCD Projector. PDAs such as Palm, iPAQ etc, Video Cameras and Digital Cameras. The Company reserves its rights to review and amend this list without further notice.

For Official Use Only.

Check By.	Approved / Rejected By.	Premium Chargeable
Name:	Name:	
Signature _____	Signature _____	
Date: _____	Date: _____	