



Member of the UOB Group

United Overseas Insurance Limited

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Co. Reg. No. 197100152R

UOI Home Contents Insurance - Application Form

Statement pursuant to Section 25(5) of the Insurance Act, you are to disclose in this form, fully and faithfully, all the facts that you know or ought to know, otherwise this Policy issued hereunder may be void.

1. Plan Selection - please tick
Premium Payable (inclusive of 9% GST)
Standard Plan 1 Year Plan 2 - Year Plan (with 10% discount) 3 - Year Plan (with 20% discount)
Essential [ ] S\$98.10 [ ] S\$176.58 [ ] S\$235.44
Deluxe [ ] S\$130.80 [ ] S\$235.44 [ ] S\$313.92
Optional Coverage Valuables [ ] Anywhere within Singapore [ ] Worldwide
[ ] (i) Unspecified article(s) Sum insured: S\$ \_\_\_\_\_
[ ] (ii) Specified article(s) Sum insured: S\$ \_\_\_\_\_
(Premium rate is subject to underwriting. Please provide the list of articles and the respective sum insured to be insured in a separate sheet)
Building excluding foundation [ ] Sum Insured: S\$ \_\_\_\_\_
Period of insurance: From \_\_\_\_\_ To \_\_\_\_\_
Total premium payable S\$ \_\_\_\_\_ Plus \_\_\_\_\_ 9% GST
S\$ \_\_\_\_\_

2. Applicant's Particulars
Name (as in NRIC/ Passport): \_\_\_\_\_
Mailing address: \_\_\_\_\_
Postal code: \_\_\_\_\_
Contact number: Mobile: \_\_\_\_\_ Home: \_\_\_\_\_
Email address: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_
NRIC/ Passport number \_\_\_\_\_
Nationality: [ ] Singaporean/ PR [ ] Others: \_\_\_\_\_
Marital status: \_\_\_\_\_ Occupation \_\_\_\_\_



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#### 3. Information on the Property to be insured

Property address: \_\_\_\_\_

Property type  Apartment/ Condominium  HDB Flat  
 Semi-detached/ Terrace

Occupancy  Owner occupied  Tenant occupied  
 Landlord

Does any financial institution has an interest in your property?

Yes  No

If Yes, with which Company and for what amount? \_\_\_\_\_

#### Declaration

I/We hereby declare that the statements and particulars are complete and correct and that no facts have been suppressed or mis-stated. I/We agree that this proposal shall form the basis of the contract between me/us and the Company.

I/We am/are aware that I/we can seek advice from a qualified adviser before making a commitment to purchase the product. In the event that I/we choose not to seek advice from a qualified adviser, I/we take sole responsibility to ensure that this product is appropriate to my/our financial needs and insurance objectives.

I/We acknowledge and agree that UOI may collect, use, disclose, transfer my/our personal data for the Purposes stated in UOI's Privacy Notice which can be found at [www.uoi.com.sg](http://www.uoi.com.sg). I/We further acknowledge by providing personal data relating to a third party (eg. Information of my dependent, spouse, children and/or parents), I/We represent and warrant that the consent of that third party has been obtained for the collection, use and disclosure of the personal data for the Purposes stated in UOI's Privacy Notice. UOI may disclose my/our personal data to its third party service providers or agents (including lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes, as such third party service providers or agents, if engaged by UOI, would be processing my/our personal data for UOI for one or more of the above Purposes. This may include disclosure to industry association.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



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Mode of payment - Please tick where applicable:

Please charge S\$\_\_\_\_\_ (including 9% GST) to my AMEX/MasterCard/VISA Credit Card ^  
(^Delete as appropriate)

Card No

Expiry Date

M M / Y Y

Verification Code

Name of Cardholder

UOB Internet Banking\*\*

Corporate PayNow\*\*  
(PayNow ID: 197100152RU01)



UNITED OVERSEAS INSURANCE LTD

\*\* Please quote our Policy Number as reference



SCAN TO PAY