

Proposal Form – GolfCare

Please complete all sections to facilitate the processing of your application.

Statement pursuant to Section 23(5) of the Insurance Act 1966 or any subsequent amendments thereof. You are to disclose in the proposal form fully and faithfully all facts which you know or ought to know, otherwise the Policy issued hereunder may be void.

Name of Producer & Producer Code: _____

Particulars of Proposer

| | | |
|----------------------------|-----------------------|--------------------------|
| Name of Proposer: _____ | | NRIC/FIN No.: _____ |
| Mailing Address: _____ | | Postal Code () _____ |
| Date of Birth: _____ | Contact No.: _____ | Nationality: _____ |
| Email: _____ | | Occupation: _____ |

Type of Coverage

| | |
|--------------------------------------|---|
| Type of Plan ¹ : _____ | Period of Insurance: From _____ To _____ |
|--------------------------------------|---|

¹ Premiums above include prevailing GST

Claims History

Any incurred and/or reported claims for the past three (3) years?
 If yes, please provide details.

Mode of Payment

Credit Card
 (VISA/Mastercard)



Scan the QR code to go to our authorized third-party payment gateway, Red Dot Payment, for secure credit card payment
<https://connect.reddotpayment.com/instanpanel/instanpay/index/golfcare>



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Name of Proposer: _____

Upon making payment, kindly email payment details and completed proposal form to accountsreceivable@libertyinsurance.com.sg.

IMPORTANT NOTES

- The liability of the Company does not commence until this Proposal has been accepted by the Company.

PAYMENT BEFORE COVER WARRANTY (INDIVIDUAL)

Please note that the total premium must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) on or before the inception date of the coverage, failing which the Policy shall be deemed to be automatically cancelled and no benefits whatsoever shall be payable by the Company.

DECLARATION

I, the Proposer, declare and warrant that:

- a) All information provided by me/us in connection with this application are true, accurate and complete
- b) I agree that this application and declaration shall be the basis of the contract between Liberty and myself
- c) I agree to accept the Company's policy subject to the terms, exclusions and conditions to be expressed therein, endorsed thereon or attached thereto
- d) If I do not fully and faithfully give the facts as I know them or ought to know them, I may receive nothing from the policy
- e) I agree to the policy terms, exclusions and conditions as expressed in the brochure, proposal form, policy wordings and endorsements
- f) I/we give consent to Liberty Insurance Pte Ltd ("Liberty") and third-parties including related entities, employees, agents, other insurers, contractors & service-providers (collectively, "Appointees") to collect, use and disclose all personal data relating to myself or other individuals that I/we have furnished in the past, present & in the future, for one or more of the purposes described in Liberty's Data Protection Policy, including but not limited to considering whether to provide insurance, carrying out due diligence, pricing, administering and servicing my policies, communicating with me/us, renewals, reinsurance, collections, claims, accounting, audit, legal, compliance, research, analysis, information-sharing, surveys, data storage & backups. I/we have read and agreed to the full Policy at www.libertyinsurance.com.sg/data-protection-policy, both now and in advance as it may be amended from time to time. If there is any personal data relating not to myself/us but to other individuals that I/we have furnished in the past, present & in the future, I/we warrant that I/we have obtained prior consent from these data subjects (or if they are lacking in legal capacity, from their legal representatives, guardians or parents as the case may be) for Liberty and its Appointees to collect, use and disclose their personal data for the abovementioned purposes and on the same terms herewith. I/we warrant that all personal data I/we have provided are accurate and complete, and I/we shall inform Liberty of any changes to the personal data to my knowledge as soon as practicable.

IMPORTANT NOTICE TO SUBMITTER

If you, the submitter of this form, are submitting this form for another person who is the actual Proposer; and in consideration for Liberty processing this application upon your request:

- a) You agree that you have been validly & legally authorised by the Proposer to do so; and
- b) You warrant that you have shown this entire completed document to the intended Proposer and had obtained his/her agreement to everything; and
- c) You, in your personal capacity, agree to indemnify and keep Liberty Insurance Pte Ltd indemnified against all proceedings, costs, expenses, claims, liabilities, losses or damages if any part of this Notice turns out to be false, howsoever whatsoever, on a **strict liability basis**, that is, even if your state of mind was unintentional, intentional, negligent, inadvertent, accidental, unknowing, etc.

Date

Signatory of Proposer

