

**Proposal Form – FMW AccidentProtect Insurance****Enhanced Accident and Hospitalisation Insurance for Foreign Migrant Workers**

Eligibility: Foreign employees holding valid work permits and S passes; aged between 16 and 69 years (age as of last birthday). Please complete all sections to facilitate the processing of your application. Statement pursuant to Section 25(5) Cap. 142 of the Insurance Act 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.

**Insured details – Foreign Migrant Worker (FMW)**

Full Name (as per Work Permit/S Pass)			
Work Permit/ S Pass No.		Date of Birth	DD/MM/YYYY
Sector	<input type="checkbox"/> Construction <input type="checkbox"/> Manufacturing <input type="checkbox"/> Marine Shipyard <input type="checkbox"/> Process <input type="checkbox"/> Services		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female		
Nationality		Mobile Phone	+65
Address in Singapore			
Address in Country of Origin			
Email @			
Legal Parent Details	Father's Full Name	Date of Birth	DD/MM/YYYY
	Mothers Full Name	Date of Birth	DD/MM/YYYY

**Choice of Cover**

Period of Insurance	From DD/MM/YYYY to DD/MM/YYYY		
Plan	<input type="checkbox"/> Plan A \$60	<input type="checkbox"/> Plan B \$85	<input type="checkbox"/> Plan C \$110

Annual premiums above exclude prevailing GST. Premiums stated above are subject to changes without prior notice.

**Summary of Benefits**

Section	Description of Benefits	Limit Per Insured Person (S\$)		
		Plan A	Plan B	Plan C
1.	Accidental Death	\$10,000	\$10,000	\$10,000
2.	Hospitalisation and Surgical In-patient Expenses incurred in Country of Origin	Up to \$2,500	Up to \$3,500	Up to \$5,000
3.	Special Grant - death by any cause (excluding natural death)	\$4,000	\$5,000	\$5,000
4.	Child Support Fund (per child limit \$500, max 4 children)	Up to \$2,000	Up to \$2,000	Up to \$2,000
5.	Family Funeral Benefit (per claim limit \$500)	Up to \$500	Up to \$1,000	Up to \$1,000

All figures above are in Singapore dollars. For full policy details, visit: [www.insureasia.com.sg](http://www.insureasia.com.sg)

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.

# Proposal Form – FMW AccidentProtect Insurance

## Proposer Declaration & Warranty

### I hereby warrant and declare as follows:

1. I/We are currently in good health, free from all physical impairment and deformity.
2. I/We have received, read and understood, or have been advised of and understand, the contents of the brochure and any information or material relating to this insurance product.
3. I/We understand and agree that no insurance is in force until a Proposal is accepted by ERGO, payment received in full and a Policy is issued.
4. I/We are aware of and agree to abide by the Policy's terms, conditions and exclusions.
5. I/We hereby declare that I/We are ordinarily resident in Singapore as defined by "Insurance Act (Chapter 142) (First Schedule)".
6. I/We agree and authorize any medical source (including hospitals and clinics), insurance officer or any other organization to release to ERGO at any time any information concerning the Insured Person(s) if required.

## Important Notes

1. Statement pursuant to section 25(5) of the Insurance Act (Cap. 142) or any subsequent amendments thereof, You are to disclose in this Form, fully and faithfully, all the facts that you know or ought to know, otherwise, the policy issued may be void and you may receive nothing from the policy.
2. Neither the brochure nor the Proposal Form is a contract of insurance. However, your warranties, declarations and disclosures therein and herein shall form the basis of the policy. The specific terms, conditions and exclusions applicable to the insurance are set out in the policy.
3. This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact ERGO Insurance Pte. Ltd. or visit the GIA or SDIC web-sites ([www.gia.org.sg](http://www.gia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).
4. Pre-existing medical conditions are not covered by the policy.

## Personal Data Protection

The Insured Person(s) understand, acknowledge, agree and consent that:

- ERGO Insurance Pte. Ltd. (ERGO) may/will collect, use, disclose and/or process the Insured Person(s) personal information set out in the proposal form and any other information provided by the Insured Person(s) or possessed by ERGO for the purpose of enabling ERGO to provide the Insured Person(s) with services required of an insurance provider, such as evaluating, processing, administering, and/or managing of the Insured Person(s) relationship and policies with ERGO. This includes among other things Policy servicing, processing, investigating, handling, administering and/or settling the Insured Person(s) claim with ERGO or other insurers;
- ERGO may/will disclose and transfer the Insured Person(s) personal information to third parties, including but not limited to its affiliates, representatives, agents and third party service providers, lawyers/law firms, whether located within or outside Singapore, for one or more of the above purposes, and the said third parties may/will subsequently collect, use, disclose and/or process the Insured Person(s) personal information for one or more of the above purposes;
- If personal information of third parties (e.g. information of Insured Persons, beneficiaries, beneficial owners, dependents, customers, payees and/or employees) is provided to ERGO, the provider of such personal information represents and warrants to ERGO that prior consents have been obtained from each of the third parties to provide such information.

Note: Please refer to the full version of Our Data Privacy Policy found at <https://www.ergo.com.sg/pdpa>.

- ERGO, its group companies and/or business partners may contact me/us to share information about products and services from ERGO by post, e-mail and **Telephone**  **Text message**

DD/MM/YYYY

Signature of Insured Person or  
his/her Authorised Representative

Date

Underwritten by:

ERGO Insurance Pte. Ltd.  
Co. Reg. No.: 199305211H GST Reg. No.: M2-0116930-5  
5 Temasek Boulevard #04-05 Suntec Tower Five Singapore 038985  
Tel: +65 6829 9199 Fax: +65 6829 9248 [www.ergo.com.sg](http://www.ergo.com.sg)