



7 Temasek Boulevard, #10-01 Suntec Tower One, Singapore 038987
Tel: 63374779 Fax: 63389267 (Company Registration No: 198901301C)

FOREIGN WORKERS' MEDICAL INSURANCE PROPOSAL FORM (Foreign Worker, excluding Foreign Domestic Worker)

IMPORTANT NOTICE

1. Notice pursuant to Section 25(5) of the Insurance Act Cap 142 or any subsequent amendment thereof, you must tell us (ECICS Limited) in this Proposal fully and faithfully all facts which you know, or ought to know. Otherwise, you may receive nothing from the Policy.
2. Our liability in respect of this proposal does not commence until acceptance has been communicated by us to you.
3. Our policy carries a Premium Payment Warranty. Coverage under the Policy will be automatically terminated pursuant to the terms of the Premium Payment Warranty if the premium is not paid in full within 60 days from the commencement of the cover.
4. You must answer all the questions in this Proposal Form. Any questions not answered will be taken as answered in the negative.

Intermediary Name: _____ **Intermediary Code:** _____

DETAILS OF INSURED	
Name of Insured:	
Business Address:	
Tel No.:	Fax No.:
Person-in-charge E-mail:	
Nature of Business:	
Period of Insurance: From	To

DETAILS OF WORKERS			
Nos	Name of Worker	Passport No	Work Permit / S-Pass No

The Insured hereby agrees:

1. To furnish all information regarding insured required by the Company for the purpose of calculating premiums or benefits.
2. That the statements in this proposal form and the information received by the Company shall form part of this proposal form and the Policy, and shall be the basis for the underwriting.
3. All individuals, for whom proposal form for insurance is submitted, or may be submitted during the continuance of the Policy, shall be full-time salaried employees of the applicant.
4. That the applicant shall notify the Company in writing of any addition or termination of employees and the insurance cover or cancellation of cover for such employees shall take effect immediately, unless otherwise advised.
5. That the Policy is subject to the premium being paid and received in full by the Company within the period specified in the Premium Payment Warranty applied to the Policy. Coverage under the Policy will be automatically terminated pursuant to the terms of the Premium Payment Warranty if the premium is not paid in full within 60 days from the commencement of the cover.

Important Notice

1. Work Permit Holders and S-Pass Holders must complete a medical examination required by MOM as a condition for grant of work pass.
2. The co-insurance or deductible (if any), whichever is higher, applies on a per claim basis.
3. Coverage excludes work-related accidents.
4. 90 days pre & 90 days post hospitalization outpatient services must be related to the hospitalization for the claim to be admitted.
5. Policy will be issued on a named-basis (for group size 10 and below) and is not guaranteed renewable.
6. There is no Free Look provision in this Policy
7. Cancellation Refund: Based on short term premium rate (refer to General Condition 2 of Policy) and subject to a minimum premium of \$50

Claims Experience for the past 3 years, as at _____(Mth/Yr)

Insurance Period		No. of Employees	Paid Claims for Period		Outstanding Claims for period	
From	To		Number	Amount SGD	Number	Amount SGD

CONSENT FOR USE AND DISCLOSURE OF PERSONAL DATA

1. To process, administer and/or manage your relationship, account and policy with ECICS Limited ("ECICS"), ECICS will necessarily need to collect, use, disclose and/or process your personal data or personal information about you collected from (i) you in your personal capacity or acting as a personal guarantor, (ii) any person authorized by you, and/or (iii) third parties including Relevant Individuals (defined below). In cases where the proposer is not an individual, all references to "personal data" and/or "personal information" shall also be construed as references to the "personal data" and/or "personal information" of the individuals or insured persons that are relevant to or set out in this proposal.

Such personal data includes :
 - a) information set out in this form and any other personal information provided by you or possessed by ECICS;
 - b) data and information relating to your no-claim discount; and/or
 - c) data and information relating to your claims.
 - d) (where applicable) data relating to your organization's beneficial owners, partners, directors, officers or authorized signatories, representatives, employees, customers, guarantors, other security providers and any other natural persons related to your organization (collectively the "Relevant Individuals");
2. Such personal data will be collected, used, disclosed and/or processed by ECICS for the purpose(s) of :
 - a) processing your proposal form for underwriting and insurance, and considering whether to provide you with the insurance you applied for;
 - b) processing proposal form for underwriting and insurance by a company, organization or entity, in which you have provided a personal guarantee or joint-and-several personal guarantee;
 - c) administering and/or managing your relationship, facility, account, documentation and/or policy with ECICS, whether in your personal capacity or acting as a personal guarantor;
 - d) carrying out due diligence or other screening activities (including identity and background checks) in accordance with legal or regulatory obligations that are required by law or risk management procedures that have been put in place by ECICS;
 - e) conducting checks with the Do No Call Registry administered by the Personal Data Protection Commission, Singapore;
 - f) processing and/or dealing with any claims including the settlement of claims and any necessary investigations relating to the claims, under your policy;
 - g) investigating and preventing fraud, misconduct, any unlawful action or omission, whether relating to your proposal form, your claims or any other matter relating to your policy, and whether or not there is any suspicion of the aforementioned;
 - h) recovery of all and any amounts owed or owing to ECICS;
 - i) legal purposes including but not limited to obtaining legal advice and enforcing ECICS' legal rights;
 - j) carrying out your instructions or responding to any enquiry, feedback or complaints by you;
 - k) reinsurance of risks and reinsurance management;
 - l) facilitating any business assignment, transfer, participation or part thereof in any of ECICS' rights and obligations in respect of your relationship with ECICS.
 - m) generating financial, regulatory, management, analytical or other related reports;
 - n) conducting market research and statistical analysis; and
 - o) complying with any applicable rules, laws, regulations, codes of practices or guidelines, orders or requests issued by any court, legal or regulatory bodies and agencies, both national and international.
 - p) any other purposes that are reasonably related or similar to any of the above. (collectively the "Purposes")
3. We may/will also be collecting from sources other than yourself, personal data about you, for one or more of the above Purposes, and thereafter using, disclosing and/or processing such personal data for one or more of the above Purposes.
4. Your personal data collected by ECICS may/will be disclosed to :
 - a) your insurance agents, insurance brokers, other insurance companies or reinsurance companies;
 - b) any related company of ECICS and its director, staff and relevant persons.
 - c) external parties with professional relationship with ECICS including auditors and solicitors;
 - d) local or overseas third party service providers or its agents as such third party service providers or agents whose services would be engaged by ECICS to process your personal data, such as printing, courier, data processing, marketing and research, disaster recovery and others;
 - e) parties engaged by ECICS for assistance in dispute resolution or investigation and adjudication of claims;
 - f) banks and other financial institutions, credit information bureaus, credit rating agencies and debt collection agencies;
 - g) any assignee or transferee of all or any part of the business and/or asset of ECICS or participant or sub-participant of ECICS' rights or obligations in respect of any of your facility, account or policy;
 - h) any party giving a guarantee or third party security or guarantee or any party connected to your facility, account or policy; and
 - i) local or overseas regulatory, government and law enforcement bodies and persons authorized by such bodies.
5. By signing below, you :
 - a) consent to ECICS collecting, using, disclosing and/or processing your personal data for the Purposes as described above;
 - b) consent to ECICS collecting personal data about you from sources other than yourself and using, disclosing and/or processing the same, for one or more of the Purposes as described above;
 - c) consent to ECICS disclosing or transferring your personal data to our third party service providers or agents (whether in Singapore or outside of Singapore), for the Purposes as described above;
 - d) by providing personal data relating to Relevant Individuals and/or a third party (such as your dependents, spouse, children and parents) to ECICS, you represent and warrant to ECICS that the consent of that Relevant Individual or third party has been obtained for the collection, use and disclosure of the personal data for any or all of the purposes set out in this Notice.
 - e) in the case of a proposer which is not an individual, represent and warrant that you have obtained the consent of the individuals and/or insured persons relevant to or set out in this proposal in accordance with the terms as set out at paragraphs 5(a) to 5(d) above; and
 - f) represent and warrant that you have read and understood the above provisions.

DECLARATION

- For the purpose of this proposal, the undersigned being an authorised representative of the Proposer and any other parties to be included for this insurance declare that the statements herein are true, accurate and complete; otherwise the policy issued may be void. ECICS Limited is authorised to make any inquiry in connection with this proposal. Neither the acceptance of this proposal nor the making of any further inquiry will bind ECICS Limited to complete the insurance.
- The information contained in and submitted with this proposal is on file with ECICS Limited and along with the proposal is considered physically attached to the Policy and will become part of it. ECICS Limited has relied upon this proposal and attachments in issuing this Policy. The undersigned authorised representative proposed for this insurance agree that the information contained in and submitted with this proposal is deemed material to the risk assumed by ECICS Limited.
- If the information in this proposal materially changes between the date this proposal is signed and prior to the inception date of the Policy, the proposer will notify ECICS Limited, who may modify or withdraw the quotation.

Name:

Designation (if applicable):

Signature and/or Company Stamp

Date: