

**LONPAC INSURANCE****LONPAC INSURANCE SINGAPORE PTE. LTD.**

300 Beach Road #17-04/06 The Concourse Singapore 199555

Tel: (65) 6250 7388 Fax: (65) 6296 3767

www.lonpac.com.sg UEN: 202539075M GST No.: 202539075M

**Personal CarePlus Insurance
Application Form**

Intermediary Name:

Code:

Statement pursuant to Section 25(5) of the Insurance Act, Cap 142. You must disclose in this application form, fully and faithfully, all the facts which you know or ought to know. Otherwise, the policy issued may be void.

Eligibility:

Adult(s) : Age 18 to 70 years old (at last birthday). Policy is renewable up to 75 years old subject to satisfactory health declaration.

Child(ren) : Age Day 15 to 18 years of age (25 years of age for full time students in a recognized tertiary institution who is/are dependant of Insured).

All Singaporeans, Permanent Residents of Singapore, or Foreigners with valid Employment Passes (EP holder) residing in Singapore.

DETAILS OF APPLICANT

Name *Mr / Mrs / Ms / Mdm / Dr ** _____ (* delete if not applicable)
(please underline surname)

NRIC / Passport No. _____ Marital Status : ☐ Single ☐ Married ☐ Others: _____

Nationality _____ Date of Birth (DD/MM/YYYY) _____ Gender ☐ Male ☐ Female

Residential Address _____ Postal Code _____

Occupation _____ Contact (Email) _____ (Mobile Phone) _____

DETAILS OF FAMILY MEMBERS OF MAIN APPLICANT (IF ANY)

Name	Date of Birth (dd/mm/yyyy)	NRIC/ Passport No	Occupation	Gender
Spouse :				
Child 1 :				
Child 2 :				
Child 3 :				

COVER REQUIRED

Period of Insurance (1 year): From _____ to _____

Insured	Occupational Class	Basic Plan	Standard Plan	Premier Plan	Premium
☐ Main Insured	☐ Class 1 & 2	☐ S\$ 171.20	☐ S\$ 303.60	☐ S\$ 438.00	S\$ _____
	☐ Class 3	Refer to Underwriter			
☐ Spouse (After 10% discount)	☐ Class 1 & 2	☐ S\$ 154.08	☐ S\$ 273.24	☐ S\$ 391.32	S\$ _____
	☐ Class 3	Refer to Underwriter			
☐ Child(ren) x _____ (up to 3 children)	☐ Class 1 & 2	☐ S\$ 34.24 (per child)	☐ S\$ 60.72 (per child)	☐ S\$ 87.60 (per child)	S\$ _____
	☐ Class 3	Refer to Underwriter			
TOTAL PREMIUM					S\$ _____

Notes:

- 1) All Insured Persons have to be covered under the same plan
- 2) Spouse of Main Insured is entitled to a 10% discount on the Main Insured's premium.
- 3) Child(ren) is covered up to 20% of Main Insured's Benefits (coverage is limited to Accidental Death, Permanent Disablement, Double Indemnity for Accidental Death and Permanent Disablement, Medical Expenses and 21 Infectious Diseases only). Premium charged is 20% of Main Insured's premium.
- 4) Proposal for children must include at least one parent.
- 5) The premium stated is inclusive of 9% GST.
- 6) For Class 3 occupation, please refer to underwriter.

www.lonpac.com.sg

PAYMENT MODE**PayNow**

Please scan QR code with your mobile Banking App.
Please indicate your policy number(s) in Reference/Bill field.

Bank Transfer

Beneficiary Name/Bank: Lonpac Insurance Singapore Pte. Ltd. / UOB Ltd Bank/Branch code: 7375 / 016
Swift code: UOVBSGSG Account No: SGD 116-305-693-9
Please indicate your policy number(s) in the bank payment field.

Cheque

Issue cheque to Lonpac Insurance Singapore Pte. Ltd.
Please indicate your policy number(s), name and contact number behind the cheque.

Credit Card

To complete credit card deduction form.

**SCAN TO PAY****HEALTH DECLARATION**

- 1) Do you and/or the person(s) to be insured suffer from any physical defect or infirmity or disease of any kind? ☐ Yes ☐ No
If YES, please specify: _____
- 2) Have you and/or the person(s) to be insured sustained any accidental injuries over the last three years? ☐ Yes ☐ No
If YES, please specify: _____
- 3) Do you have any other Personal Accident and Medical Insurance with other insurer? ☐ Yes ☐ No
If YES, please specify: _____
- 4) Have any of your proposal for Life, Critical Illness or Medical Insurance on your life to any insurer ever been declined, postponed or accepted at other than normal terms? ☐ Yes ☐ No
If YES, please specify: _____
- 5) Do you engage in any hazardous sport or activity that is likely to cause bodily injuries? ☐ Yes ☐ No
If YES, please specify: _____

DECLARATION

I/We want to effect the insurance specified here and declare that I/We:-

- i. warrant that the information given and answers to questions in this form are true and correct to the best of my knowledge and have not withheld any facts likely to influence Lonpac Insurance Singapore Pte. Ltd. assessment of this Application.
- ii. warrant that I am currently in good health and free from physical defects, infirmity or illness or recurring illness.
- iii. understand that all pre-existing conditions before the effective date of this policy are not covered.
- iv. understand that the personal accident benefits of this insurance will only be payable upon an accident occurring.
- v. agree to accept the terms, conditions and exclusions contained in the policy and as modified or extended and agree that this form, declaration and any other information provided shall form the basis of the contract.
- vi. understand this form will be subject to the approval and acceptance by Lonpac Insurance Singapore Pte. Ltd. and the premium fully paid and received by Company before the effective date.

DATA PRIVACY STATEMENT

- i. In accordance with the Personal Data Protection Act 2012, I/We consent to the collection, use and disclosure of my/our personal data (whether contained in the Application or otherwise obtained) by Lonpac Insurance Singapore Pte. Ltd. ("Lonpac"), its affiliates and service providers (within or outside Singapore), for the purpose relating to this Application, any Policy issued and to provide advice and information for relating products and services to me by Short Message Service (SMS), Multimedia Messaging Service (MMS) and fax messages (notwithstanding the registration of my telephone number(s) in the Singapore's Do Not Call Registry).
For more information on our privacy policy, please visit our website: https://www.lonpac.com.sg/web/sg/privacy_policy
- ii. I/We understand that under the Personal Data Protection Act 2012, I/We have the right to request access, update my/our personal data and withdrawal of consent in writing to Lonpac at the following address:

Attention: The Data Protection Officer
Office address: 300 Beach Road #17-04/06 The Concourse Singapore 199555

I/We have read and agreed to the above Declaration and Data Privacy Statement.

Signature of Main Applicant

Name: _____

NRIC / Passport No: _____

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 Lonpac Insurance Singapore Pte. Ltd. or visit the GIA/LIA or SDIC web-sites at www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg

This document is not a contract of insurance. Please refer to the policy which will be issued to you upon acceptance of your application for the applicable terms, conditions and exclusions.

COVERAGE SUMMARY

S/N	Benefits	Basic Plan	Standard Plan	Premier Plan
ACCIDENT				
1	Accidental Death	S\$100,000.00	S\$200,000.00	S\$300,000.00
2	Accidental Permanent Disablement	S\$100,000.00	S\$200,000.00	S\$300,000.00
3	Temporary Total Disablement (up to 104 weeks)	S\$200.00 per week	S\$300.00 per week	S\$400.00 per week
4	Temporary Partial Disablement (up to 104 weeks)	S\$100.00 per week	S\$150.00 per week	S\$200.00 per week
5	Double Indemnity for Accidental Death and Permanent Disablement whilst travelling or boarding any licensed public transport [ENHANCED]	S\$200,000.00	S\$400,000.00	S\$600,000.00
MEDICAL EXPENSES				
6	Medical Expenses (Annual Limit)	S\$5,000.00	S\$6,000.00	S\$8,000.00
7	Hospital Allowance (up to 60 days)	S\$75.00 per day	S\$100.00 per day	
8	Traditional Chinese Medicine (TCM)	S\$75.00 per treatment up to S\$500.00 any one period of insurance	S\$100.00 per treatment up to S\$750.00 any one period of insurance	
9	21 Infectious Diseases - Zika Fever (Zika Virus Disease) [NEW] - Middle East Respiratory Syndrome (MERS) [NEW] - Hand, Foot and Mouth Disease (HFMD) - Avian Influenza or “Bird Flu” due to Influenza A viral strains H1N1, H5N1, H9N2, H7N7 or H7N9 - Severe Acute Respiratory Syndrome (SARS) - Dengue Fever / Dengue Hemorrhagic Fever - Variant Creutzfeldt-Jakob Disease (Vcjd) or “Mad Cow Disease” - Nipah Virus Encephalitis - Japanese Viral Encephalitis - Malaria - Pulmonary Tuberculosis - Measles - Rabies - Melioidosis - Chikungunya Fever - Mumps [NEW] - Rubella [NEW] - Cholera [NEW] - Yellow Fever [NEW] - Poliomyelitis [NEW] - Diphtheria [NEW]	Up to S\$1,000.00	Up to S\$1,200.00	Up to S\$1,600.00
10	HIV through Blood Transfusion [NEW]	S\$10,000.00		
LIFESTYLE				
11	Repatriation Allowance	Up to S\$10,000.00		
12	Bereavement Allowance	Up to S\$3,000.00	Up to S\$4,000.00	Up to S\$5,000.00
13	Child Education Fund (up to 3 Children)	NA	S\$10,000.00 per child	
14	Parent Shield (up to 2 parents)	NA	S\$10,000.00 per parent	
15	Home & Mobility Enhancement [NEW] - Includes mobility aid, prosthesis & ambulance service, home & vehicles retrofitting	Up to S\$1,500.00	Up to S\$2,000.00	Up to S\$2,500.00
Basic Premium (inclusive of 9% GST) - Class 1 & 2		S\$171.20	S\$303.60	S\$438.00
Basic Premium (inclusive of 9% GST) - Class 3		Refer to Underwriter		

Classification of Occupations

Class 1	Persons engaged in professionals, administrative, managerial, clerical and non-manual occupations / Indoor work solely in office or similar non-hazardous places/sedentary nature.
Class 2	Persons with occupations that involves supervisory nature or outdoor work or engaging in occasional manual labour whose duties do not require the use of tools and machinery and expose to any special hazard.
Class 3	Persons with occupations involving manual labour requiring the use of tools and machinery and non-hazardous work but excluding woodworking and other heavy machinery.
Excluded Occupation	Law enforcement and civil defence personnel, fulltime military personnel, firemen, professional divers, persons engaging offshore activities, oilrig workers engaged in mining activities, aerial photography handling explosives or working at docks air/sea cabin crew, professional sports personnel and persons engaged in hazardous sports. (Please note that this list is not exhaustive)