Jewellers Block Insurance

Proposal Form



Important Notices

Statement pursuant to Section 25 (5) of the Insurance Act (Cap. 142) (or any subsequent amendments thereof) - You are to disclose in this Proposal Form fully and faithfully all facts which you know or ought to know, otherwise the policy issued hereunder may be void.

Your Duty of Disclosure

Before you enter into a contract of general insurance with an Insurer, you have a duty to disclose to the Insurer every matter that you know, or could reasonably be expected to know, is relevant to the Insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the Insurer before you renew, extend, vary or reinstate a contract of general insurance.

It is important that all information contained in this proposal is understood by you and is correct, as you will be bound by your answers and by the information provided by you in this proposal. You should obtain advice before you sign this proposal if you do not properly understand any part of it.

Your duty of disclosure continues after the proposal has been completed up until the contract of insurance is entered into.

Non-Disclosure

If you fail to comply with your duty of disclosure, the Insurer may be entitled to void the contract from its beginning.

Change of Risk or Circumstances

You should advise the Insurer as soon as practicable of any change to your normal business as disclosed in the proposal, such as changes in location, acquisitions and new overseas activities.

Subrogation

Where you have agreed with another person or company, who would otherwise be liable to compensate you for any loss or damage which is covered by the policy, that you will not seek to recover such loss or damage from that person, the Insurer will not cover you, to the extent permitted by law, for such loss or damage.

1.	Ger	General Information							
(a)	Name of Proposer and Subsidiary and/or Affiliated Companies (in full)								
(b)	State address of the premises to which the Policy is to apply.								
(c)	State the floor on which your premises are situated.								
(d) How long have you carried on business:									
	In tl	nese Premises		Elsewhere					
2.	Nat	ure of Your Business							
Reta	ail		%	Wholesale	%				
Mar	ufact	uring	%	Pawnbroking	%				
3.	Em	ployees							
(a)	Hov	many employees do you have?							
(b)		nt is the minimum number of employeding business hours, including lunchtime		ipals in the sales section of your pre	mises at any time				
4.	Val	uation Basis							
On	what	oasis do you require claims to be settle	d?						
N.B.	Proj	ess otherwise agreed on the Policy clair posal must reflect the basis of valuation		our own stock will be settled on the	basis of <u>cost</u> price. All figures completed in	n this			
(i)		it was the average total value during th	e last twelve mon	ths for:					
	(a)				e or on the basis as in question 4 above.)				
		\$							
	(b)	Goods in trust (other than for safe cus			\$				
	(c)	Total for (a) and (b)			\$				
		The total under (a) and (b) comprises	approximately of	:					
		Jewellery, gold and platinum goods, b	oullion, precious s	tones and pearls	\$				
		Watches			\$				
		Clocks, silverware, plateware, and other similar goods \$							

(11)		es at any time during the last twelve months?	ust (other than for the safe custody) and bank	φ
6.	Val	ues Out Of Safe		
		l be the maximum value of all watches, jewellery, gold, bullio ked safe or strongroom?	on and platinum goods, precious stones and pearls (including	g those in windows)
Out	side t	pusiness hours		\$
Dur	ing te	emporary closing e.g. Lunch Time (if applicable)		\$
7.	Wi	ndow Display		
Α.	Hov	v many of the following do you have?		
	(a)	Windows		
	(b)	Outside showcases		
В.	Stat	e the maximum values which will not be exceeded for:		
	(i)	Any one:		
		(a) Window		
		During business hours	Outside business hours	
		(b) Outside showcase		
		During business hours	Outside business hours	
	(ii)	Any one article		
		During business hours	Outside business hours	
	(iii)	Any one pad or tray of articles		
		During business hours	Outside business hours	
	(iv)	In all windows and outside showcases		
		During business hours	Outside business hours	
8.	Out	tdoor Risk		
I.		Safe Deposit) ngers and delivery		
		No. of days each person per annum		
		Average amount each \$		

		Maximum amou	nt eacn	\$					
		(ii) Number of mess	engers and delivery hands						
		No. of days each	No. of days each person per annum						
		Average amount	each	\$					
		Maximum amou	nt each	\$					
	(b)	Elsewhere in the cou	ntry in which the Proposer's _l	premises are	situated:				
		Names of all principa	ls, representatives, travellers	and agents					
		No. of days each pers	on per annum						
		Average amount each	ı	\$					
		Maximum amount ea	ch	\$					
	(c)	Elsewhere (state Coun	tries in each case):						
		Names of all principa	ls, representatives, travellers	and agents					
		No. of days each pers	on per annum						
		Average amount each	ı	\$					
		Maximum amount ea	ch	\$					
II.	Hon	ne Risk							
	Does	s any Principal, Employ	ee, Traveller or Agent take Sto	ck to his priva	ate residence for a	ny purpose?	☐ Yes ☐ No		
	If Yes, please provide the following information:								
	Na	une	Address		Maximum value taken	Full details of Safe or any other protection	Is the property ever left unattended at the Private Dwelling House?		
					\$		☐ Yes ☐ No		
					\$		☐ Yes ☐ No		
					\$		☐ Yes ☐ No		
					\$		☐ Yes ☐ No		
					\$		☐ Yes ☐ No		

	What was the estimated value entrusted to dealers, customers, repairers, cutters and brokers during the past 12 months?							
	(a)	Average	\$					
	(b)	Maximum (at any one time)	\$					
IV.	Sen	dings						
	ins	nat was the aggregate total value of all sured property sent during the past 12 onths:	By Registered Post	By Registered Air Mail	By Other Air Conveyances	By Ordinary Po Rail, Steamer a other Conveya	ınd	
	(a)	in the country in which the Proposer's premises are situated?	\$	\$	\$	\$		
	(b)	elsewhere (state countries and values sent to each)?	\$	\$	\$	\$		
	N.B.	The Policy contains a condition that po any one package are sent by registered		jewellery, precious stones	s, precious metals and/or	watches exceed	ing \$100	
V.	Exh	ibitions And Displays						
	(a)	Did you during the past 12 months exhor financially assisted by any Public Auperformance?			=	☐ Yes	□ No	
		If Yes, please provide full particulars in	ncluding values.					
	(b) Do you exhibit goods, in any showcase in any hotel, club or elsewhere away from your premises?					□ No		
		If Yes, please provide full particulars in	ncluding values and detail	ls of protections (i.e. type	of glass locks and the like)).		
VI.	Out	side Limit (which also includes send	lings)					
	Wha	at limit is required for any one loss for p	roperty elsewhere than ir	n the Proposer's premises	stated in Question 1(b)?	\$		
	(Thi	s limit will NOT apply to property in an	y safe deposit vault or bar	ık vault).				
Pro	tecti	ons: General Protections of the Pr	emises					
9.	Are the premises occupied at night							
	(a)	by the Proposer?				☐ Yes	□ No	
	(b)	by an employee or a caretaker?				☐ Yes	□ No	
10.	Are	there any openings leading to cellar or	basement from outside th	e shop?		☐ Yes	□ No	
	If Ye	es, please provide details and protection	ıs.					

III. Entrustments

п.	Give	re details of the following and now they are protected:										
	(a)	Each outer door										
	(b)	Each	ninner door									
	(c)											
	(d)											
	(e)	Doy	ou have any of the following access controls?									
		Man	trap / Airlock	☐ Yes	□ No							
		Buzz	zer Entry	☐ Yes	□ No							
12.	Disp	lay W	findow And Showcase Protections									
	(a)	Plea	se provide full details of the type of glass in all your display windows and/or outside showcases.									
	(b)	(i)	Are all sections of the windows containing jewellery, gold, silver, platinum, pearls and precious stones and watches substantially partitioned off from the remainder of the display?	☐ Yes	□ No							
		(ii)	What precautions do you take to protect the rear of your display windows?									
		(iii)	Are they kept permanently locked and keys removed?	☐ Yes	□ No							
		(iv)	Are interior showcases similarly locked and keys removed?	☐ Yes	□ No							
	(c)	At n	ight and at all other times when premises are not open for business									
		(i)	Are all display windows and/or outside showcases protected externally by either shutters or by a grille?	Yes	□ No							
		(ii)	Give full particulars of such protections and state how they are secured.									
		(iii)	Does this protection cover the entire front of your premises?	☐ Yes	□ No							
			If No, please provide details.									

(d) During Business Hours									
			all your display windows and/or outside showcases containing jewellery, gold, silver, platinum, pearls and precious ches protected internally either by:	stones and	l				
		(i)	fixed grilles covering the whole of the display?	☐ Yes	□ No				
	If Yes, please provide specifications of these grilles.								
		(ii) Hanging glass suspended between the window glass and the display?							
		(iii)	Can the internal grilles or the suspended glass be reached under or over or around?	☐ Yes	□ No				
13.	Burg	glar A	larms						
	(a)	Is th	ere a Central Station monitored Burglar Alarm?	☐ Yes	□ No				
		If Yes, state name and forward copy of maker's specification to Underwriters (or if not available give full details).							
	(b)	Are	holdup/panic buttons incorporated in the system?	☐ Yes	□ No				
	(c)	c) Is the Alarm connected to remote central station with Dual Signalling (e.g. GSM back up?)							
	(d)	Is th	☐ Yes	□ No					
14.	Safe	S							
	(a)	Give the maker's name of safe, cost when purchased (state whether new or second-hand), and give details of any descriptive mark the door.							
	(b)	App	Approximate size and weight						
		Size	Weight						
	(c)	Approximate age							
	(d)	Is the safe fully connected to the alarm system?		☐ Yes	□ No				
		If Ye	es, please provide details of sensors i.e. seismic, heat, magnetic contacts.						
	(e)	☐ Yes	□ No						

		a. How many staff know the combinations?			
		b. Are the combinations changed regularly?	☐ Yes	□ No	
	(f)	$What is the \ Rating \ of the \ safe? \ Include \ details \ of \ rating \ body \ / \ institute. \ i.e. \ Underwriters \ Laboratory \ / \ European \ Standard \ Advisority \ / \ European \ Standard \ / \ Advisority \ / \ Adviso$	rds		
15.	Stro	ong Rooms			
	Is th	nere a Strong Room?	☐ Yes	□ No	
		es, please provide full details including construction of all 6 sides, door, alarm connectivity, CCTV coverage, time lock, con l control opening.	mbination l	lock, and	
16.	Are	all the keys (including your Alarm, Safe and Strong Room keys) removed from the premises outside business hours?	Yes	□ No	
17.	Are	there any other special means of protection?	☐ Yes	□ No	
	If Ye	es, please provide details.			
18.	Stoc	ck Records			
	(a)	When was your last annual stocktaking?			
	(b)	Do you keep proper records of all sales purchases and transactions?	Yes	□ No	
19.	Los	ses			
	Hav	e you ever sustained a loss or losses?	☐ Yes	□ No	
		es, please provide a statement covering the past five years with particulars, including the amount of each loss, and, if insu all or otherwise.	red, wheth	er paid	
20.	Rec	eipts			
	(a)	Is it your practice to give receipts for goods left with you by non-trade customers, for repair, valuation, sale, or any other purpose and to require surrender of such receipts before goods are returned to the customer?	Yes	□ No	
	(b)	Do you use entrustment/approbation notes in respect of all entrustments?	Yes	□ No	
21.	Sun	n Insured			
	For	what amount is Policy required?			
	(a)	On Stock (including goods in trust and bank notes)			
		\$			

	(b)	On Trade and Office Furniture, Fixtures and Fittings, and all other Contents (except your stock and goods in trust) at your premises against the risks of Fire, Lightning, Explosion, Aircraft, Burglary or Theft or any attempt thereat, Storm, Tempest, Flood or Bursting or Overflowing or Leakage of Water Pipes or Apparatus, or Impact by any road vehicle not belonging to or under your control.							
		\$							
	Tota	al for (a) and (b): \$							
22.	Refe	erences							
	Unle	ess proposing for renewal, please provide two references <u>from your trade</u> .							
23.	Oth	er Insurance							
	(a)	Have Lloyd's or any other Insurer ever cancelled or refused to issue or to continue any Insurance for you?	☐ Yes	□ No					
	(b)	Have you previously been insured?	☐ Yes	□ No					
		If Yes, please with whom, risks covered, and for what amount.							
24.		there any other circumstances within your knowledge or opinion not already disclosed, affecting or likely to affect proposed insurance?	☐ Yes	□ No					

Declaration

Signing this Form does not bind the Proposer to complete the Insurance, but it is agreed that this Form shall be the basis of the Contract should a Policy be issued.

I/We have read the above and agree that to the best of my/our knowledge and belief it represents a true and complete statement.

I/We agree that if this Insurance is completed the protections and/or safeguards mentioned above shall not be withdrawn or varied to the detriment of the interests of the Underwriters without their consent.

Personal Data Protection Statement

Chubb Insurance Singapore Limited ("Chubb") is committed to protecting your personal data. Chubb collects, uses, discloses and retains your personal data in accordance with the Personal Data Protection Act 2012 and our own policies and procedures. Our Personal Data Protection Policy is available upon request. Chubb collects your personal data (which may include health information) when you apply for, change or renew an insurance policy with us, or when we process a claim. We collect your personal data to assess your application for insurance, to provide you with competitive insurance products and services and administer them, and to handle any claim that may be made under a policy. If you do not provide us with your personal data, then we may not be able to provide you with insurance products or services or respond to a claim.

We may disclose the personal data we collect to third parties for and in connection with such purposes, including contractors and contracted service providers engaged by us to deliver our services or carry out certain business activities on our behalf (such as actuaries, loss adjusters, claims investigators, claims handlers, third party administrators, call centres and professional advisors, including doctors and other medical service providers), other companies within the Chubb Group, other insurers, our reinsurers, and government agencies (where we are required to by law). These third parties may be located outside of Singapore.

You consent to us using and disclosing your personal data as set out above. This consent remains valid until you alter or revoke it by providing written notice to Chubb's Data Protection Officer ("DPO") (contact details provided below). If you withdraw your consent, then we may not be able to provide you with insurance products or services or respond to a claim.

From time to time, we may use your personal data to send you offers or information regarding our products and services that may be of interest to you. If you do not wish to receive such information, please provide written notice to Chubb's DPO.

If you would like to obtain a copy of Chubb's Personal Data Protection Policy, access a copy of your personal data, correct or update your personal data, or have a complaint or want more information about how Chubb manages your personal data, please contact Chubb's DPO at:

Chubb Data Protection Officer Chubb Insurance Singapore Limited 138 Market Street #11-01 CapitaGreen Singapore 048946 E dpo.sg@chubb.com

Signature of Proposer

Date

Contact Us

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Chubb. Insured.

Published 10/2017 Page 10 of 10

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