

Application for Fire insurance for Hawker Stalls (小贩摊位 火灾保险)

Statement under section 25(5) of Insurance Act, Cap. 142 (Or any future amendments to it)

You must reveal all facts you know, or ought to know, which may affect the insurance cover you are applying.
Otherwise, the insurance policy may not be valid.

Fire insurance for Hawker Stalls

Fires at markets/foodstalls centres had caused much hardship to the stallholders. They were not able to operate their stalls resulting in loss of income. Stall fixtures, utensils and stock were damaged and require replacement.

Income is providing a policy to cover such losses.

Policy covers loss or damage to Contents eg. fixtures & fittings, equipment, stock-in-trade arising from fire, lightning, explosion, flood, bursting or overflowing of waterpipes, strike, riot, civil commotion, impact by road vehicles.

You can also opt to cover Loss of income for S\$100 per day up to 90 days should you be unable to operate your stall due to the above perils.

Simply complete the application form to effect cover.

小贩摊位 火灾保险

在巴刹/小贩中心发生的几场大火，烧毁了无数摊位，使摊主无法营业，失去收入。即使修好后，也得需要一批重修费，添购具材等等。英康的小贩摊位火灾保险可以解决这些难题。

这份保单将赔偿因火灾，闪电，雷电，爆炸，洪水，水管爆裂或溢漏。或游行，罢工，动乱和车辆意外碰撞所造成的财物损失。

如果不幸遇到上述风险而需要中断营业，若选择附加营业中断利益，每天就可获得S\$100的赔偿，长达90天。

投保手续简便，只需填妥下列表格。

Particulars of proposer (投保人资料)

Name of proposer (as shown in NRIC) 投保人姓名		NRIC number 身份证号码	Date of birth 出生日期 (dd/mm/yyyy)
Contact number 电话 (Home)	(Handphone)	Type of business/trade 生意性质	Unique entity number (UEN) 商号注册编号
Correspondence address of proposer 投保人地址			
Address of premises to be insured 被保摊位地址			

Details of insurance required (保险详情)

Period of insurance 保障期限 (dd/mm/yyyy)	From 从 _____	To 到 _____	
Cover (please tick) 保障(请选择)	Sum Insured 保额	Permanent Market 永久巴刹 Premium (Incl GST) 保费(已含消费税)	Temporary Market 临时巴刹 Premium (Incl GST) 保费(已含消费税)
<input type="checkbox"/> Fire on contents 火灾保障利益	<input type="checkbox"/> S\$ 10,000 <input type="checkbox"/> S\$ 15,000 <input type="checkbox"/> S\$ 20,000 <input type="checkbox"/> S\$ 25,000 <input type="checkbox"/> S\$ 30,000	<input type="checkbox"/> S\$ 77.04 <input type="checkbox"/> S\$ 115.56 <input type="checkbox"/> S\$ 154.08 <input type="checkbox"/> S\$ 192.60 <input type="checkbox"/> S\$ 231.12	<input type="checkbox"/> S\$ 101.65 <input type="checkbox"/> S\$ 152.48 <input type="checkbox"/> S\$ 203.30 <input type="checkbox"/> S\$ 254.13 <input type="checkbox"/> S\$ 304.95
<input type="checkbox"/> Loss of income for S\$100 营业中断利益 (per day up to 90 days) (每日利益额,但不超过90日)		<input type="checkbox"/> S\$ 77.04	<input type="checkbox"/> S\$ 101.65
Total Premium (including 7% GST) 总保费(已含消费税): S\$ _____			

Personal data collection statement

Income recognises its obligations under the Personal Data Protection Act 2012 (PDPA) which include the collection, use and disclosure of personal data for the purpose for which an individual has given consent to.

The personal data collected by Income includes all personal data provided in this form, or in any document provided, or to be provided to us by you or your insured persons or from other sources, for the purpose of this insurance application or transaction. It includes all personal data for us to evaluate or administer this application or transaction. For example, if you are applying for an insurance policy, in addition to the personal data provided in the application form, the personal data will also include any subsequent information we collect on health or financial situation, or any information that is necessary for us to decide whether to insure and on what terms to insure, such as test results, medical examination results, and health records from medical practitioners or other insurance companies.

You may not alter any of the wording in this 'Personal data collection statement'. Any attempt to do so will be of no effect.

1. Purpose of collection

We may collect and use the personal data to:

- (a) carry out identity checks;
- (b) communicate on purposes relating to an application or policy;
- (c) decide whether to insure or continue to insure you and your insured persons;
- (d) determine and verify your creditworthiness for the financial and insurance products you apply for;
- (e) provide financial advice for product recommendation based on your financial needs analysis;
- (f) provide ongoing services and respond to your inquiries or instructions;
- (g) make or obtain payments;
- (h) investigate and settle claims;
- (i) recover any debt owed to us;
- (j) detect and prevent fraud, unlawful or improper activities;
- (k) conduct research and statistical analysis;
- (l) coach employees and monitor for quality assurance;
- (m) reinsure risks and for reinsurance administration;
- (n) comply with all applicable laws, including reporting to regulatory and industry entities; and
- (o) inform you of our philanthropic and charity initiatives, i.e. OrangeAid, including soliciting donations, acknowledging donations, and facilitating tax exemption.

2. Disclosure of personal data

We may disclose personal data belonging to you and your insured persons for the purposes set out in Section 1 above to these parties:

- (a) your insurance agents or insurance brokers;
- (b) medical professionals and institutions;
- (c) insurers and reinsurers;
- (d) local or overseas service providers to provide us with services such as courier service, survey, printing, mail distribution, data storage, data entry, marketing and research, disaster recovery or emergency assistance services;
- (e) debt collection agencies;
- (f) dispute resolution parties;
- (g) parties that assist us to investigate, administer and adjudicate claims;
- (h) financial institutions;
- (i) credit reference agencies;
- (j) industry associations; and
- (k) regulators, law enforcement and government agencies.

3. Consequence of withdrawing consent to the collection, use and disclosure of personal data

You may refuse or withdraw your consent for us to collect, use or disclose your personal data and your insured persons' personal data by giving us reasonable notice so long as there are no legal or contractual restrictions preventing you from doing so. For example, you may withdraw your consent for your personal data to be used for marketing purposes, and this withdrawal will not affect our ability to provide you with the products and services that you asked for or have with us.

But if you withdraw your consent for us to use your personal data for your insurance matters, this will affect our ability to provide you with the products and services that you asked for or have with us, including preventing us from keeping your insurance cover in force or properly assessing and processing your claim. Withdrawing such consent will require you to surrender or terminate all your policies with us.

4. Access and correction rights

You can request access to any personal data of yours that we have, and request to know how it is being used and disclosed for the last 12 months to the extent your right is allowed by law. If we allow you access, we may charge you a reasonable fee. You also have the right to request correction of your personal data.

5. Consent to receive marketing materials

By signing up for this product or service, I give my consent to Income to collect, use and disclose my personal data, and contact me via email and post, for both rewards and privileges, marketing and promotional purposes.

In addition, by checking the boxes below, I consent to being contacted by you via telephone calls, SMS and other phone number-based messaging about products and services offered by Income, regardless of my registration(s) with the Do Not Call registry.

Call Text messages/SMS

I agree that Income will use the contact particulars, including any update that I have given to Income, to contact me.

I may withdraw my above consent by contacting Income Contact Center at 6788 1777 or DPO@income.com.sg.

Please refer to www.income.com.sg/privacy-policy for more information.

Declaration and authorisation

I/We declare that the above information is true, correct and complete, and whether written by me/us or by anyone else on my/our behalf, I/We accept full responsibility for them.

I/We have not withheld any material information. I/We agree that this application and other written statement, information or declaration made by me/us or on my/our behalf shall form the basis of the contract of insurance between me/us and Income.

I/We acknowledge that the liability of Income does not commence until this application has been accepted and the premium paid and received in full by Income.

If a material fact is not disclosed in this application, any policy issued may not be valid. If you are in doubt as to whether a fact is material, you are advised to disclose it. This includes any information that you may have provided to the intermediary but was not included in the application. Please check to ensure you are fully satisfied with the information declared in this application.

Signature of proposer 投保人签名

Date 日期 (dd/mm/yyyy)

For official use

Intermediary's name 保险顾问姓名	Intermediary's code 保险顾问代码	Date 日期 (dd/mm/yyyy)	Policy delivery <input type="checkbox"/> Hand <input type="checkbox"/> Mail
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Mail form with cheque made payable to "NTUC Income" to NTUC Income, 75 Bras Basah Road, Income Centre, Singapore 189557.

请致银"NTUC Income"并将支票寄至以上地址。