PROPOSAL FORM					
PROPOSER'S INFORMATION					
Name of Proposer:					
NRIC/Passport No.: Profession/Occupation:					
Address:					
Home: Office: Mobile: Fax:					
Email: Gender: Male Female					
Date of Birth: Marital Status: Single Married other					
DETAILS OF PROPERTY TO BE INSURED					
Situation of Risk:					
Mortgagee (If applicable):					
Period of Insurance: From: To					
The SUM to be insured must represent FULL VALUE of the property, the Proposer being required to sign a declaration to that effect below. The	ť				
insurance will be subject to average, which means that if at the time of loss or damage the sum insured is less than the full value of the property					
nsured the amount payable is proportionately reduced.					
SECTION I - BUILDINGS					
The Proposer's Private Dwelling House or Flat and all the Domestic Offices, Stables, Garages and Out-Buildings used solely in connection therewith and on the same premises including Fixtures and Fittings therein and the Walls, Gates and Fences around and pertaining thereto.					
Fotal Sum Insured on Buildings: Total Premium:					

SECTION II - CONTENTS

On Household Goods and Personal Effects of every description (except as after mentioned) the property of the Proposer or any member of the Proposer's family and domestic staff normally residing with the Proposer in the Proposer's Private Dwelling and all the Domestic office, Stables, Garages and Out-Buildings used solely in connection therewith and on the same premises.

No one article (Furniture, Pianos, Household Appliances, Wireless and Television Sets and Organs excepted) will be deemed of greater value than five (5) per cent of the Total Sum Insured on the said Contents unless such articles is specially declared as a separate item.

value th	here any such articles of greater an five (5) per cent of the Total ured on the said Contents)			
Total Su	Fotal Sum Insured on Contents: Total Premium:				
<u>IMPORT</u>	TANT NOTE				
1.	The value of Platinum, Gold and Silv Insured on Contents.	er Articles, Jewellery and Furs payable under the P	olicy is limited to one-third of the Total Sum		
2.	 This Policy is for Private Dwelling and/or Contents contained therein, occupied solely for residential purposes or residential and domestic office purposes. No manufacture or deposit or storage of merchandise may be allowed in the Private Dwelling or in any portion of the premises of which the Private Dwelling forms a part. 				
3.	This Policy does not cover property	more specifically insured or, unless specially menti	oned declared herein:-		
	_	omissory Notes, Cheques, Securities for Money, Stand Coins, Motor Vehicles and Accessories.	mps, Documents of any kind, cash, Currency Notes,		
UNDER	WRITING INFORMATION				
1.	Are the walls and floors made of co	ncrete/Brick? If No, please gives details:			
2.	Is the roof constructed of ceramic o				
3.	What is the height of the building, (i.e. the number of storeys)?			
4.	Are there any outbuildings and, if so	o, how are they constructed? Please gives details:_			
5.	Please state the nature of your residual	dence (tick whichever applicable):-			
	a) Detached Private Dwelling Hou Please state the distance away	se. the nearest building (excluding small out-houses):			
	 b) Non – detached Private Dwellin c) Flat or Apartment with separat d) Room not self-contained. 	ng House. e entrance exclusively under your control.			
6.	Is the dwelling occupied solely by you guests. Please gives details:	ou and your family and servants? If no, state number	er of other tenants, lodgers, boarders or paying		

7.	Will the dwelling regularly be left unoccupied? Yes No If yes, please gives details:
	Attention is drawn to a proviso in the policy that covers against Theft will be suspended for any period or period in excess of 90 days any one period of insurance during which the dwelling be left without an inhabitant therein unless specially agreed to by the Comparation
8.	Are the buildings in a good state or repair and will they be so maintained? Yes No
9.	Is insurance required against:
	a) Full Theft (under Contents only). b) Riot, Strike and Malicious Damage (under Buildings and Contents). c) Accidental damage to plate glass (under Buildings only). d) Rent Insurance under Section IIIA of the policy in excess of the 10% of the Total Sum Insured on Buildings and/or Contents. If yes, please tick (/) appropriate limit.
10.	Has any Company or Insurer in respect of any of the Contingencies to which this proposal applies: a) Declined to insure you? b) Required special terms to insure you? c) Cancelled or refused to renew your insurance? d) Increased your premium on renewal? If so, please give details:
11.	Have the Buildings and/or Contents suffered damage by hurricane, cyclone, typhoon, windstorm, or flood during the past five years? If yes, please give details:
12.	Have you ever sustained loss from any of the herein mentioned perils, other than those referred to in (11) above? Yes No If yes, please give details:
13.	Have you any other policies in force covering any of the contingencies to be insured against? Yes No If yes, please give details:
14.	If this proposal is in lieu of any insurance with this Company, please give details:

(NOTE FOR QUESTIONS 9 (a) to (d), RATES WILL BE QUOTED ON APPLICATION)

DECLARATION

I/We hereby declare that the above statements and particulars are true, and that I/We withheld no material information regarding this Proposal.

I/We hereby agree that this Declaration, and the particulars above given, as well as any further Proposal or Declaration or Statement made in writing by me or anyone acting on my/our behalf shall form the basis of the contract between me/us and the company, and I/We further agree to

accept indemnity subject to the conditions in and endorsed on the Company's Policy.					
I/We also declare that THE TOTAL SUMS TO BE INSURED REPRESENT NOT LESS THAN THE FULL VALUE OF THE PROPERTY, as above mentioned, and I/We agree that no insurance shall commence until the Proposal has been accepted by the Company.					
I/We confi Company's	_	ntained in the Product Disclosure Sheet provided to me/us and/or available on the			
Please add	d B\$0.25 stamp duty to your premium				
	I/We enclose cash/cheque for B\$	made payable to Standard Insurance Sdn Bhd			
	Bank/Cheque No:				
	Signature of Applicant	 Date			
	On behalf of person(s) to be insured				
IMPORTA	ANT NOTICE				
may be vo	id. Please note that this insurance is subject to the p	Il the facts, which you know or ought to know, otherwise the policy issued hereunder premium being paid and received in full by the company, (a) before the inception date eriod specified in the premium Payment Warranty applied to Policy in all other er.			
FOR OFFI	CIAL USE				
We confirr	m acceptance of this application in accordance or po	olicy terms, conditions and exceptions, effective			
Name & Si	gnature of Approving Officer/Date:				
Policy Nun	nher:	Agent Code:			