

# GREAT Enterprise Insurance Package PLUS

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A SPEED RATE  
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## **GREAT Enterprise Insurance Package PLUS**

This comprehensive insurance package is for businesses in retail, office, F&B, services segments, and is specifically designed to offer flexibility for business owners.

While we protect the most important manpower resources that are critical to your business operations, you can then focus on achieving your business goals.

### **All Risk**

Offers coverage for property damage and provides daily cash benefit (optional) arising from unforeseen and sudden circumstances.

### **Work Injury Compensation**

Protects employers under the Work Injury Compensation Act (WICA), employees against work accidents or illnesses, and your liability under Common Law up to S\$10 million.

### **Money**

Protects against any loss or damage to your money, whether on your premises or in transit.

### **Fidelity Guarantee**

Protects against financial loss arising from any act of fraud or dishonesty committed by your employees.

### **Public Liability**

Protects employers against third parties' liabilities in the event of accidental death or injury, or damage to property related to your business.

### **Group Personal Accident**

Protects employees with a lump sum payment in the event of accidental death or permanent disability, including medical expenses incurred as a result of an accident.

The information provided in this material is a summary. Please refer to the actual policy wordings for the terms and conditions.

Great American Insurance Company – Singapore Branch, 3 Temasek Avenue, #16-01 Centennial Tower, Singapore 039190. Coverage is summarized. All amounts are shown in Singapore Dollars (S\$). Refer to the actual policy for a full description of applicable terms, conditions, limits and exclusions. Policies are underwritten by Great American Insurance Company – Singapore Branch, a licensed insurer in Singapore. Registration number T15FC0029B. © 2023 Great American Insurance Company. All rights reserved. 5580-SGP (09/23)

**Coverage At A Glance**

| <b>Types of Trades</b>   |  |   |  |
|--|--|---|--|
| <b>Office</b>  | <b>Retail</b>  | <b>F&amp;B</b>  | <b>Services</b>  |
| <p>Office Based businesses, but not including:</p> <ul style="list-style-type: none"> <li>- Contractors</li> <li>- Motor Trade/ Garages</li> <li>- Couriers/Delivery Spaces</li> <li>- Office with Store</li> <li>- Offsite Contract Works other than non-manual duties</li> <li>- Manufacturing / Production</li> </ul> <p>* This policy can also cover offices situated in light industrial buildings (of class 1 construction) as long as manufacturing, production or storage is not included.</p> | <p>Retail business, but not including:</p> <ul style="list-style-type: none"> <li>- Jewellery and timepieces</li> <li>- Mobile phone, tablets and accessories</li> <li>- Antiques and collectibles</li> <li>- Money changers</li> <li>- Stamps, precious stones / metals</li> <li>- Building and construction material</li> <li>- Livestock</li> <li>- Alcohol and Tobacco</li> <li>- Joss sticks and joss papers</li> <li>- Paints and Varnishes</li> <li>- Flammable and hazardous products</li> <li>- Computer components</li> <li>- Motor showroom, motor accessories workshop</li> <li>- Nurseries and landscaping</li> <li>- Pawn shops</li> <li>- Petrol Stations / Kiosks</li> <li>- Medical / Pharmaceutical Products</li> <li>- Skincare Products</li> <li>- Offsite Contract Works other than non-manual duties</li> <li>- Aesthetic business like tattoo, parlours, ear piercing services and any form of body art</li> <li>- Chinese medical hall engaging in traditional Chinese practices such as acupuncture, bone setting, etc</li> </ul> | <p>F&amp;B business, but not including:</p> <ul style="list-style-type: none"> <li>- KTV, pubs and night clubs</li> </ul> | <p>Personal Services, Clinics such as Hair Salons, Spas, Weight Loss Centres, Fitness Centres, Tuition Centres / Enrichment Classes but not including:</p> <ul style="list-style-type: none"> <li>- Aesthetic business like tattoo parlours, ear piercing services and any form of body art, cosmetic surgeries</li> <li>- Massage Parlours, foot reflexology centres</li> </ul> |

**Important Notice**

Application is subjected to the following:

- No claim experience, pending litigations, losses for the past three (3) years.
- Not aware of any circumstances that may lead to a claim.
- Limit to five (5) premises.
- The Insured Premises is constructed of brick or concrete and/or of non-combustible materials.
- Fire protection systems are installed on the premises with smoke alarm systems and fire extinguishing devices all of which are well-maintained and in operation at all times.
- All entrances to the Insured Premises are protected with roller shutter/glass door/iron grilles and are securely locked after operating hours.
- Insured property are not to be kept in the open.
- Insured Premises are not situated in a wet/dry market.
- Insured does not have any business operations outside Singapore.
- For Services trade, Specified safety standards set out in the Consumer Protection (Safety Requirements) Registration Scheme managed by SPRING Singapore is complied with and that any treatment under such covered services does not involve the breaking of or abrasion of the skin.
- Sum Insured for Stock-in-Trade should not exceed the proportion of total All Risks Sum Insured as set out below:

| Trade                            | Office | Retail | F&B | Services |
|----------------------------------|--------|--------|-----|----------|
| % of Total All Risks Sum Insured | 0%     | 50%    | 50% | 25%      |

- The proposed insurance has not been declined, cancelled, refused renewal or subject to any special terms by any other insurance company.
- The premises is solely occupied by the Insured for the business only and not to be shared with others.
- The business nature of the application is subjected to Insurer’s acceptance and approval to effect cover.
- The information declared in this form may be made known to the Ministry of Manpower as and when required.

**General Information of Applicant**

| <b>Group Personal Accident Section (Fill if taken up)</b> |                         |                                       |  |                    |                   |
|---|-------------------------|---------------------------------------|--|--------------------|-------------------|
| <b>Name<br/>(As per NRIC/Passport/FIN)</b>                | <b>Gender<br/>(M/F)</b> | <b>Date of Birth<br/>(DD/MM/YYYY)</b> | <b>NRIC/<br/>Passport/<br/>FIN No.</b> | <b>Nationality</b> | <b>Occupation</b> |
| 1.  |                         |                                       |  |                    |                   |
| 2.  |                         |                                       |  |                    |                   |
| 3.  |                         |                                       |  |                    |                   |
| 4.  |                         |                                       |  |                    |                   |
| 5.  |                         |                                       |  |                    |                   |

**Basis of Coverage/Premium Tabulation**

| Coverage Description  |  | Coverage Limits   |  | Flexi Plan Rates (exclusive of GST) |                                 |                              |                                   | Sum Insured             | Premium = SI X rate |
|---|--|---|--|-------------------------------------|---------------------------------|------------------------------|-----------------------------------|-------------------------|---------------------|
|   |  | Fixed Plan  | Max Limits   | <input type="checkbox"/> Office     | <input type="checkbox"/> Retail | <input type="checkbox"/> F&B | <input type="checkbox"/> Services |                         |                     |
| <b>Estimated Turnover of Insured must be less than S\$10,000,000</b>  |  |   |  |                                     |                                 |                              |                                   |                         |                     |
| <b>For Flexi Plan, Insured has to take up at least any 2 of All Risks, Work Injury Compensation or Public Liability</b> |  |   |  |                                     |                                 |                              |                                   |                         |                     |
| All Risk<br>(Excess S\$250 each and every claim)  | Covers accidental physical loss or damage to the insured property  | S\$100,000  | S\$10,000,000  | 0.080%                              | 0.150%                          | 0.150%                       | 0.135%                            | S\$ _____               | S\$ _____           |
| Work Injury Compensation  | Cover your obligation as an employer for work-related accidents or illnesses   | 2 indoor non-manual employees   | 25 employees, up to Estimated Annual Wages of S\$1,000,000                 | 0.055%                              | 0.080%                          | 0.440%                       | 0.120%                            | No _____<br>EAW _____   | S\$ _____           |
| Public Liability<br>(Excess S\$250 each and every claim)  | Covers your legal liability to third parties arising out of an accident  | S\$500,000  | S\$5,000,000   | S\$50.00 per S\$500K                | S\$50.00 per S\$500K            | S\$100.00 per S\$500K        | S\$75.00 per S\$500K              | S\$ _____               | S\$ _____           |
| - Food and Drinks Extension   | Covers your legal liability to third parties arising out of food or drinks sold or supplied at your premises                                 | S\$50,000   | S\$200,000   | S\$10.00 per S\$25K                 | S\$10.00 per S\$25K             | S\$10.00 per S\$25K          | S\$10.00 per S\$25K               | S\$ _____               | S\$ _____           |
| - Work Away Risks   | Covers your legal liability to third parties while working outside your insured premises up to S\$100,000 in the aggregate                   |   |  | S\$10.90 if taken up                | S\$10.90 if taken up            | S\$10.90 if taken up         | S\$10.90 if taken up              | S\$ _____               | S\$ _____           |
| <b>Optional Cover</b>   |  |   |  |                                     |                                 |                              |                                   |                         |                     |
| Fidelity Guarantee  | Covers the financial loss as a result of fraudulent or dishonest act committed by your employee  | S\$5,000 per employee and S\$10,000 in the annual aggregate – 2 employees | S\$5,000 per employee and S\$10,000 in the annual aggregate – 25 employees | S\$15.00                            | S\$30.00                        | S\$30.00                     | S\$30.00                          | S\$ _____               | S\$ _____           |
| Group Personal Accident   | Provides lump sum payout to the insured person in the event of an accident resulting in death or permanent disablement                       | S\$50,000 for 1 insured person  | S\$50,000 per insured person up to 25 insured persons                      | S\$15.00                            | S\$20.00                        | S\$30.00                     | S\$25.00                          | S\$ _____               | S\$ _____           |
| Business Interruption   | Provides lump sum daily cash benefit in the event the business is interrupted as a result of physical loss or damage to the insured property | S\$200 per day, up to 100 days  | S\$500 per day, up to 100 days   | 0.080%                              | 0.150%                          | 0.150%                       | 0.135%                            | S\$ _____               | S\$ _____           |
| Money   | Covers the loss of money in the insured premises or whilst in transit anywhere in Singapore  | S\$5,000  | S\$50,000  | 0.500%                              | 0.500%                          | 0.500%                       | 0.500%                            | S\$ _____               | S\$ _____           |
| Premium for Fixed Plan<br>(Premium inclusive of GST)  | <input type="checkbox"/>   |   |  | S\$250.70                           | S\$359.70                       | S\$599.50                    | S\$392.40                         | S\$ _____ Premium       | S\$ _____ GST       |
| Minimum Premium for Flexi Plan (Premium inclusive of GST)   |  |   |  | S\$218.00                           | S\$218.00                       | S\$272.50                    | S\$272.50                         | S\$ _____ Total Premium |                     |



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GREAT Enterprise Insurance
Package PLUS Proposal Form

STATEMENT Section 25(5)

Statement pursuant to Section 25(5) of the Insurance Act (Cap.142). You are to disclose in this proposal form fully and faithfully all the facts which you know or ought to know, otherwise you may not receive any benefit from your policy.

Note to the Applicant:

- This Proposal Form is for the Applicant to complete and submit to Great American (together with all required information and documents) for the purpose of applying for Great Enterprise Insurance Package PLUS.
Please answer ALL questions fully. If there is insufficient space in this form for you to complete any of your answers, please attach a separate signed and dated sheet with your complete answer and identify the question number concerned.
In this Proposal Form:
a. "Applicant" means the entity intended to be the insured, defined as the Insured in the Policy.
b. "Great American" means the Singapore Branch of Great American Insurance Company.
c. "Policy" means GREAT Enterprise Insurance Package PLUS, a sample of which is available on request. For avoidance of doubt, references to the Policy shall not bind Great American to issue one.
d. The words "Insured Person(s)" and "Insured" have the same meanings as defined in the Policy.

Name of Intermediary Account No.

General Information of Applicant

Name of Company Contact No.
Business Address Postal Code
Email Business Reg. No.
Situation of Risk (if different from above)
Nature of Business
Period of Insurance (DD/MM/YYYY):
From To

**Payment Options**

Bank Transfer - Beneficiary Name: Great American Insurance Company  
 Bank Name: DBS Bank Limited Singapore  
 Bank Address: 12 Marina Boulevard,  
 DBS Asia Central MBFC Tower 3,  
 Singapore 018982  
 SGD Account No.: 0039330324  
 Swift Code: DBSSSGSG  
 PayNow: UEN: T15FC0029B001



I hereby authorize "Great American Insurance Company" to debit my credit card account as specified below.

Credit Card Type  Mastercard  Visa

Credit Card No. \_\_\_\_\_

Expiry Date (MM/YYYY) \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

**Warranty**

I hereby warrant and declare on behalf of all **Insured Person(s)** as follows:

- a. I/We hereby declare that I/we have received, read and understood, or have been advised of and understand, the contents of the brochure and any information or material relating to Great Enterprise Insurance Package PLUS for SME Policy.
- b. I/We understand and agree that no insurance is in force until an Application is accepted by the Company and a Policy is issued.
- c. I/We are aware of and agree to abide by the Policy's terms, conditions and exclusions.

**False Information**

Please note that any person who, knowingly and with intent to defraud any insurance company or other person, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

**Personal Data Protection**

- 1. In order to process, evaluate, administer and/or manage your application, relationship, account and/or policy with Great American Insurance Company, Singapore Branch ("**Great American**"), Great American will necessarily need to collect, use, disclose and/or process your personal data or personal information about you. Such personal data includes (i) information set out in this statement and any other personal information provided by you or already in the possession of Great American as previously provided by you; and (ii) your claims.
- 2. Such personal data will be collected, used, disclosed and/or processed by "**Great American**" for the purpose(s) of:
  - a. considering whether to provide you with the insurance you applied for including considering whether to accept any renewal request;
  - b. processing your application for underwriting and insurance;
  - c. administering and/or managing your relationship, account and/or policy with Great American;

- d. processing and/or dealing with any claims including the settlement of claims and any necessary investigations relating to the claims, under your policy;
- e. carrying out due diligence or other screening activities (including background checks) in accordance with legal or regulatory obligations or risk management procedures that may be required by law or that may have been put in place by Great American;
- f. carrying out your instructions or responding to any enquiries by you;
- g. dealing in any matters relating to the services and/or products which you are entitled to under a policy which you are applying for or have applied for; (including the mailing of correspondence, statements, invoices, reports or notices to you, which could involve disclosure of certain personal data about you to bring about delivery of the same as well as on the external cover of envelopes/mail packages);
- h. investigating fraud, misconduct, any unlawful action or omission, whether relating to your application, your renewal request, your claims or any other matter relating to your policy, and whether or not there is any suspicion of the aforementioned; and/or
- i. complying with applicable law in administering and managing your relationship with Great American.

(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 may/will be disclosed by Great American to affiliates of Great American and third parties such as third party service providers, reinsurers or agents (including its lawyers/law firms) (“**Relevant Parties**”), which may be sited outside of Singapore, for one or more of the above Purposes, and such Relevant Parties would be processing your personal data for Great American in relation to one or more of the above Purposes.
- 5. By signing below, you:
  - a. consent to Great American collecting, using, disclosing and/or processing your personal data for the Purposes as described above;
  - b. consent to Great American 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 Great American disclosing your personal data to the Relevant Parties, for the Purposes as described above; and
  - d. consent to Great American transferring your personal data out of Singapore to the Relevant Parties, for the Purposes as described above.

I have read and agree to the above.

#### **Declaration and Signature**

The undersigned authorized principal, partner or director of the **Applicant** hereby declare that to the best of his/her knowledge and belief, the statements set forth herein and all attachments and schedules hereto are true and complete, and immediate notice will be given should any of the above information alter between the date of this **Proposal** and the proposed inception date of the **Policy**. Although the signing of this **Proposal** does not bind the undersigned on behalf of the **Applicant** or any potential **Insured** to effect insurance, the undersigned agree on behalf of all potential **Insured** that this **Proposal** and all attachments and schedules hereto and the said statements herein shall be the basis of and will be incorporated in the **Policy** should one be issued.

\_\_\_\_\_  
Signature of Applicant & Company Stamp

\_\_\_\_\_  
Date