



redefining / insurance

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 GST Reg No. M2-0009922-2  
 Co. Reg No. 196900406D

**APPLICATION FORM – SMARTCARE PRIME**  
 Scheme with Insured United Agency Pte Ltd

Name of Advisor: Insured United Agency Pte Ltd	Account Code: 03812
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<b>Surname</b>	<b>Given name</b>	<b>NRIC No. / FIN No</b>	
<b>Date of Birth (dmmyyyy)</b>	<b>Age</b>	<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Marital Status</b>
<b>Have you been in Singapore for more than 182 days at the time of application? Yes / No</b>			
<b>Mailing Address</b>		<b>Postal code</b>	<b>Tel (H) (O) (Mobile/ Pager)</b>
<b>Nationality</b>	<b>Occupation/Profession</b>		<b>Job nature Industry</b>

**PARTICULARS OF FAMILY MEMBERS TO BE INSURED**

Relationship	Full Name	NRIC/ FIN	Date of Birth	Occupation
Spouse				
Child 1				
Child 2				
Child 3				

	Gold			Silver		
Insured/Spouse	Class I	Class II	Class III	Class I	Class II	Class III
	S\$278	S\$360	S\$520	S\$168	S\$230	S\$430
Per Child	S\$75			S\$50		

**Part IV - Details of Insurance (Please tick the appropriate box)**

PERIOD OF INSURANCE : From \_\_\_\_\_ (ddmmyyyy) To \_\_\_\_\_ (ddmmyyyy)

ANNUAL PREMIUM : S\$ \_\_\_\_\_ per year

**Part V - Questionnaire**

1. Do you have or ever had any disease, infirmity, illness or physical defect? YES / NO  
 If yes, please give details:

\_\_\_\_\_

2. Are you engaged in anything hazardous in your occupation, sports or any other pursuits? YES / NO  
 If yes, please give details:

\_\_\_\_\_

**Part VI - Declaration**

1. I/We declare that the above answers are full, complete and true and agree that they shall form part of my/our application which shall be the basis of the contract of insurance.
2. I/We declare that all persons proposed for insurance are in good health and are free from any form of physical defect or infirmity.
3. I/We understand that this Policy shall only be effectively following full annual/monthly premium payment and subject to the acceptance and approval of this application by AXA Insurance Singapore Pte Ltd.
4. I/We declare that no such insurance has been terminated in the last 12 months due to breach of any premium payment condition.
5. I/We also agree that in case of any claims, I/we authorise any hospital, physician or other person who has attended to us, or examined us or is authorised to maintain medical records, to disclose when requested to do so by AXA Insurance Singapore Pte Ltd, any and all information with respect to any illness or injury, medical history or treatment. A photocopy of this authorisation shall be considered as effective and valid as the original.
6. I/We understand that AXA Insurance reserves the right to request for a copy of the latest medical report from me/us at my/our own expense should further medical information be required.

\_\_\_\_\_  
Signature of Client (for and on behalf of all persons to be insured)

\_\_\_\_\_  
Date (ddmmyyyy)

**Part VII - Payment Method**

**CHEQUE** - Crossed and made payable to **AXA Insurance Singapore Pte Ltd**  
Bank: \_\_\_\_\_ Cheque No.: \_\_\_\_\_

**CREDIT CARD**

Choose only ONE payment mode		
Single Deduction <input type="checkbox"/> Amex <input type="checkbox"/> Diners <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa	0% Interest Free Installment Plan <sup>1</sup> (Applicable to Visa and Master Card only) <input type="checkbox"/> OCBC <input type="checkbox"/> DBS <input type="checkbox"/> POSB <input type="checkbox"/> UOB Installment Plan <input type="checkbox"/> 6 months <input type="checkbox"/> 12 months	Cardholder's Name: _____ State Relationship (where cardholder is not the Insured) <sup>2</sup> Credit Card : _____ Expiry date: _____ (yymmdd) Card Verification Value Code (CVV) <sup>3</sup> : _____ Contact No.: _____ Date: _____

<sup>1</sup> Only for participating Banks and subject to their Card Agreement Terms & Conditions. Minimum premium of S\$200 is required for OCBC and S\$500 for DBS/POSB/UOB.

<sup>2</sup>Your security is our concern. If cardholder is not the Insured nor the insured's spouse, parent, parent-in-law, child or sibling, AXA Insurance reserves the right to reject payment via credit card.

<sup>3</sup> CVV2 - For Visa & MasterCard, CVV is the last 3-digit no. printed just above the signature panel in reverse italics on the back of your card. For AMEX, it is the 4-digit no. printed on the front of the card above the card number.

\*\* Signature is not mandatory for submission via email.

^ Only for participating Banks and subject to their Card Agreement Terms & Conditions.

**Smartcare Prime (Insured United)**

Benefits (S\$)	Gold	Silver
<b>Life's Essential</b>	<b>S\$</b>	<b>S\$</b>
Accidental Death	<b>S\$200,000</b>	<b>S\$100,000</b>
Permanent Disablement (Total & Partial)	<b>up to S\$200,000</b>	<b>Up to S\$100,000</b>
Double Indemnity for Death / Permanent Disablement due to: (i) Accident whilst travelling as a passenger in any public conveyance (ii) Earthquake, typhoon, cyclone, hurricane & flood	<b>up to S\$400,000</b>	<b>up to S\$200,000</b>
Temporary Total Disablement (up to 104 weeks) - payable to gainfully employed Person only (not applicable to housewife, students and retiree)	<b>S\$200 per week</b>	<b>S\$100 per week</b>
Compassionate Cash Relief	<b>S\$2,000</b>	<b>S\$1,000</b>
<b>Health Maintenance</b>		
Accidental Medical Expenses - *Insect or Animal Bites / Food Poisoning  - Chinese Physician Expenses & Chiropractor	<b>up to S\$4,000 per accident</b>  <b>up to S\$300</b>	<b>up to S\$3,000 per accident</b>  <b>up to S\$300</b>
Infectious Disease **	<b>up to S\$4,000 per disability</b>	<b>up to S\$3,000 per disability</b>
Daily Hospital Allowance (365 days if hospitalised for >24 hours due to an accident only)	<b>S\$150</b>	<b>S\$100</b>
<b>Lifestyle Maintenance</b>		
Income Protection	<b>6 months salary up to S\$20,000</b>	<b>6 months salary up to S\$15,000</b>
Loan Protector	<b>Up to S\$2,000</b>	<b>Up to S\$1,000</b>
Children's Education Fund	<b>S\$5,000 per child up to 3 children</b>	<b>S\$3,000 per child up to 3 children</b>
Parent's Shield	<b>S\$5,000 per parent</b>	<b>S\$3,000 per parent</b>
Full Terrorism Cover	<b>Full Covered</b>	<b>Full Covered</b>
<b>Additional Extensions</b> a. No- Claim Benefit - Incremental Sum Insured for Death/Permanent Disablement by 5% every year up to 25% of the original sum insured provided there is no claim made during the preceding period(s) b. Motor Cycling c. Riot, Strike, Civil Commotion, Hijack, Murder, Assault d. Suffocation by Smoke, Poisonous Fumes, Gas and Drowning e. Exposure & Disappearance		

**\*\*13 specified infectious diseases: Severe Acute Respiratory Syndrome (SARS); Dengue Fever / Dengue Haemorrhagic Fever; Variant Creutzfeldt-Jakob Disease (vCJD) or 'Mad Cow Disease'; Nipah Virus Encephalitis; Japanese Viral Encephalitis; Malaria; Tuberculosis; Measles; Rabies; Melioidosis; Hand, Foot and Mouth Disease (HFMD); Avian Influenza or 'Bird Flu' due to Influenza A viral strains H5N1, H9N2 or H7N7. Anthrax Infection.**

**This benefit is payable subject to 14 days waiting period.**

<i>Annual Premium (include GST)</i>	<b>Gold</b>	<b>Silver</b>
<b>Class I</b>	<b>S\$278</b>	<b>S\$168</b>
<b>Class II</b>	<b>S\$360</b>	<b>S\$230</b>
<b>Class III</b>	<b>S\$520</b>	<b>S\$430</b>

**Remarks**

- Free Cover for Child (Benefit is 30% of Main Insured for Accidental Death/Permanent Disablement, Medical Expenses, Daily Hospital Cash Allowance and Compassionate Cash Relief. BOTH PARENT has to be covered to enjoy this FREE COVER.**
- Child Age is between 15days to 18 years and for those in full-time tertiary institutions, the age limit will be extended to twenty-five (25) years old.

**Classification of Risks**

Class I - Persons engaged in professional, administrative, managerial, clerical and non-manual work solely in office or similar non-hazardous places.

Class II - Persons engaged in work of a supervisory nature and others not in class I whose duties do not involve the use of tools or machinery or expose them to any special hazard.

Class III - Persons engaged in manual work not of particularly hazardous nature but involving the use of tools or machinery.

Referred Risks - Persons working in Security Organisations, Construction Industries, Entertainment Industries, Drivers and Carpenters.

Declined Risk - Pilots, Ship Crew, Air Crew, Professional Sportsman, military, police, fire-fighter, offshore work, occupation involved in diving, oil-rig platform, on-board vessel or offshore work or occupations of hazardous nature such as involving height, depth or heat.

**Eligibility**

- Adults age from 18 to 70 years (age next birthday), Policy renewal up to years 80 old years old, thereafter renewable up to 85 years old subject to all benefits are being reduced by 50% in each plan .
- Singapore Citizen, Permanent Residents of Singapore, EP Holders, Student pass Holders, Dependents Pass Holders, or Work Permit Holders.
- This information is not a contract of insurance. For full terms and conditions, please refer to the Policy which is the operative document.

<b>CHILD BENEFITS</b> Smartcare Prime (Insured United)		
<b>Benefits (S\$)</b>	<b>Gold</b>	<b>Silver</b>
<b>Life's Essential</b>	<b>S\$</b>	<b>S\$</b>
Accidental Death	<b>S\$60,000</b>	<b>S\$30,000</b>
Permanent Disablement (Total & Partial)	<b>up to S\$60,000</b>	<b>up to S\$30,000</b>
Accidental Medical Expenses - *Insect or Animal Bites / Food Poisoning  - Chinese Physician Expenses & Chiropractor due to Accident Only)	<b>up to S\$1,200 per accident</b>  <b>up to S\$90</b>	<b>up to S\$900 per accident</b>  <b>up to S\$90</b>
Daily Hospital Allowance (365 days if hospitalised for >24 hours due to an accident only)	<b>S\$45</b>	<b>S\$30</b>
Infectious Disease **	<b>up to S\$1,200 per disability</b>	<b>up to S\$900 per disability</b>
Compassionate Cash Relief	<b>S\$1,000</b>	<b>S\$500</b>
<p><b>Additional Extensions</b></p> <p>a. No- Claim Benefit - Incremental Sum Insured for Death/Permanent Disablement by 5% every year up to 25% of the original sum insured provided there is no claim made during the preceding period(s)</p> <p>b. Motor Cycling</p> <p>c. Riot, Strike, Civil Commotion, Hijack, Murder, Assault</p> <p>d. Suffocation by Smoke, Poisonous Fumes, Gas and Drowning</p> <p>e. Exposure &amp; Disappearance</p>		
<p><b>**13 specified infectious diseases: Severe Acute Respiratory Syndrome (SARS); Dengue Fever / Dengue Haemorrhagic Fever; Variant Creutzfeldt-Jakob Disease (vCJD) or 'Mad Cow Disease'; Nipah Virus Encephalitis; Japanese Viral Encephalitis; Malaria; Tuberculosis; Measles; Rabies; Melioidosis; Hand, Foot and Mouth Disease (HFMD); Avian Influenza or 'Bird Flu' due to Influenza A viral strains H5N1, H9N2 or H7N7. Anthrax Infection.</b></p> <p><b>This benefit is payable subject to 14 days waiting period.</b></p>		
<b>Annual Premium (include GST)</b>	<b>Gold</b>	<b>Silver</b>
<b>Per Child Rate</b>	<b>S\$75</b>	<b>S\$50</b>
<p><b>Remarks</b></p> <p>1. Child Age is between 15days to 18 years and for those in full-time tertiary institutions, the age limit will be extended to twenty-five (25) years old.</p> <p>2. <b>At least ONE parent must cover under the SAME Plan.</b></p>		

## Permanent Disablement - Table of Compensation

Permanent Disablement	Percentage (%) (applies to the sum insured in the Schedule)
1. Permanent Total Disablement: - Loss of two limbs - Loss of both hands or of all fingers and both thumbs - Total and permanent loss of sight of both eyes - Total paralysis - Injuries resulting in being permanently bedridden - Any other Injury causing permanent total disablement - Loss of hand at wrist - Loss of arm - at shoulder; between shoulder and elbow; at and below elbow - Loss of leg - at hip; between knee and hip; below knee	100
2. Loss of - four fingers and thumbs of one hand	50
- Loss of four fingers of one hand	40
3. Loss of thumb - both phalanges	25
- one phalanx	10
4. Loss of index finger - three phalanges	15
- two phalanges	10
- one phalanx	5
5. Loss of middle finger - three phalanges	10
- two phalanges	7
- one phalanx	3
6. Loss of ring finger - three phalanges	10
- two phalanges	7
- one phalanx	3
7. Loss of little finger - three phalanges	10
- two phalanges	7
- one phalanx	3
8. Loss of metacarpals - first and second (additional)	3
- third, fourth or fifth (additional)	2
9. Loss of toes - All	15
- great, both phalanges	5
- great, one phalanx or any other toes	2
10. Loss of hearing - Both ears	75
- one ear	20
11. Loss of speech	50
12. Loss of - sight of one eye, except perception of light and/or or loss of lens of one eye	50

- In the event of Permanent Disablement by Loss not specified above the percentage of compensation shall be assessed in proportion to the degree of disability as compared with the cases specified without reference to the profession or occupation of the Insured Person.
- The total aggregate sum payable in respect of any one accident shall not exceed 100% of the Sum Insured.
- Where an Insured Person sustains disablement which falls within more than one category for which a Benefit may be payable, payment will be made under the category with the higher (or highest) Benefit only. In particular, if a Benefit is payable for Loss of a whole member of the body, then no Benefit shall be payable for Loss of parts of that member.