



MIGRANT DOMESTIC WORKER (MDW) APPLICATION FORM

The Insurance Act: You are under a duty to disclose to the Company every fact you know, or could reasonably be expected to know, that may influence the Company's assessment and acceptance of the risk and the terms of such acceptance. If you are uncertain as to whether a particular information is material, these facts should be disclosed to the Company, otherwise the Policy issued may be void.

IMPORTANT NOTICE: Please read the policy wordings for the full terms, conditions and exclusions. A copy of the policy wording may be obtained from your intermediary.

A. PROPOSER / EMPLOYER PARTICULARS

Name of Proposer Lim Siew Cheng (Lin XinJing)		Gender <input type="checkbox"/> M <input checked="" type="checkbox"/> F	Nationality <input checked="" type="checkbox"/> Singaporean <input type="checkbox"/> Others
Address 81K101 Lorong Sarina #04-13 Singapore 416729		NRIC/FIN No. 87311031I	
Date of Birth (dd/mm/yyyy) 23/03/1973	Mobile No. 9033 5855	Email limlimsc@hotmail.com	SB Transmission No. E809811

B. MIGRANT DOMESTIC WORKER (MDW) PARTICULARS

Name of MDW MAY HEIN SHAR		Work Permit No. 095830552	
Nationality <input type="checkbox"/> Filipino <input type="checkbox"/> Indonesian <input checked="" type="checkbox"/> Myanmar <input type="checkbox"/> Others	Date of Birth (dd/mm/yyyy) 11/08/1999	Passport No. 44720814	
Name of Employment Agency: GLOBAL UNITED CHANNEL PRIVATE LIMITED		Policy start date (dd/mm/yyyy) From: 22/08/2023	

C. CHOICE OF INSURANCE COVERAGE (PLEASE TICK ☒ / PREMIUM (INCLUSIVE OF GST)

Enhanced Plan (Waiver of Co-Insurance) Please tick to enhance your plan <input checked="" type="checkbox"/> S\$10.80	Plan 1	
	14-month	26-month
Insurance + Letter of Guarantee	<input type="checkbox"/> S\$367.20	<input type="checkbox"/> S\$550.80
Insurance + Letter of Guarantee + Waiver of Indemnity	<input type="checkbox"/> S\$421.20	<input checked="" type="checkbox"/> S\$604.80

I consent to Singapore Life Ltd ("Singlife") (and/or Singlife related group of companies) collecting, using and/or disclosing my personal data (whether contained in this form or obtained from other source; existing data in Singlife's record or to be collected in future) for the following purposes:


- To issue and administer my existing and/or new policy(ies) and/or accounts with Singlife, and such other purposes ancillary or related to the administering of the policy(ies) and/or accounts, including the processing of my personal data for underwriting purposes, payment of premiums and/or claims purposes;
- For statistical, research, compliance, audit and regulatory purposes.

I also consent to Singlife (and Singlife related group of companies) disclosing and transferring my personal data to Singlife (and Singlife related group of companies) and their respective third party service providers, reinsurers, suppliers and intermediaries, whether located in Singapore or elsewhere, for the above purpose.

I have read and understood Singlife's Data Protection Notice which may be found at www.singlife.com/pdpa. Singlife's Data Protection Notice may be updated from time to time without notice. I am aware that I should visit your website regularly to ensure that I am well informed of the updates.

COUNTER-INDEMNITY FORM

IMPORTANT NOTICE: The Employer is hereby notified that by virtue of signing this Counter-Indemnity Form, it is hereby understood and agreed that a copy of it, either by way of fax or otherwise, shall be deemed binding and legally enforceable in a court of law and shall have the same legal effects as that of the original.

To:	Singapore Life Ltd. 4 Shenton Way #01-01 SGX Centre 2 Singapore 068807		
Dear Sirs,	RE: COUNTER-INDEMNITY FOR LETTER OF GUARANTEE NO. _____		
In lieu of the cash deposit that I/we would otherwise have to provide as security, Singapore Life Ltd. ("you") agrees to my/our request to provide a Letter of Guarantee for \$5,000 to the Ministry of Manpower of Singapore and/or Controller of Immigration of Singapore.			
In return, I/we agree and undertake as follows:			
1. I/We will, at all times, unconditionally and irrevocably guarantee to jointly and severally compensate you for all claims, payments, demands, actions, suits, proceedings losses, liabilities, costs and expenses whatsoever (including legal costs and expenses determined on a solicitor or client basis) which may be taken or made against you or which become payable by you under the Letter of Guarantee.			
2. You will have absolute discretion to compromise all claims, payments, demands, actions, suits, proceedings, losses and liabilities whatsoever which may be taken or made against you under the Letter of Guarantee.			
3. I/We shall accept the receipts, vouchers or any other evidence of all payments made by you or all liabilities or obligations incurred by you because of the Letter of Guarantee conclusive evidence of my/our liability to you.			
4. This counter indemnity shall be a continuing demand and you may at any time have absolute discretion without giving any notice to me/us extend the validity of the Letter of Guarantee without discharging or impairing my/our liability under the indemnity.			
Signature of Proposer / Employer 		Date 22/08/2023	