



Tokio Marine Insurance Singapore Ltd.

Company Reg. No. : 192300014M
20 McCallum Street
#09-01 Tokio Marine Centre
Singapore 069046
Tel : (65) 6221 6111 Fax : (65) 6225 9887
Email : tmis@tokiomarine.com.sg
Website : www.tokiomarine.com.sg

Golfer's Insurance Claim Form

(the company does not admit liability by the issuance of this form)

Please complete Sections A and B, and other relevant sections of this form for your claim. (Claims Fax : 6225 9887)

Section A: General Information

Insured: _____	Policy No: _____
Member's Name: _____	Membershi No: _____
Address: _____	Type: <input type="checkbox"/> member <input type="checkbox"/> spouse <input type="checkbox"/> junior <input type="checkbox"/> employee
Occupation : _____	Tel No/email: _____
Payee's Name (in the event the claim is payable): _____	
Do you have any other insurance that will cover this loss? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please provide details: _____
Are you a member of other golf clubs? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please provide
Club Name: _____	Membership No.: _____

Section B: Details of incident (leading to damage, loss, injury or hole in one)

Date of Incident: _____ Time Occurred: _____

Place Incident occurred: _____

If the incident occurred on golf course, state Hole No: _____

Did incident occur on Tee Box / Fairway / Green / Bunker / Driving Range? _____

Names of persons who witness Incident/Hole In One : _____

Description of Incident : _____

For Hole In One claims, you need to fill up only Sections A & B. Please attach letter from the golf club certifying the achievement, Hole In One Certificate, Score Card and bills and receipts in support of your claim.

Section 1: Public Liability Claims

State name and address of third party: _____

How is the third party related to you : _____

Extent of third party's loss or injury : _____

State estimated amount of claim : _____

Please let us have your views as to who is at fault : _____

Please do not admit liability to third parties.

Golfer's Insurance Claim Form cont'd

Section 2: Personal Accident Claims

State nature of injury sustained by you : _____

Please submit medical report, medical certificates and medical bills for this section of claim.

Sections 3,4,5: Please fill up the following (as applicable):

Was the loss reported to the police or relevant authorities managing the place eg airport authorities, club management, shopping mall, MCST etc? Yes No. If Yes, please attach a copy of report

Has a thorough search been conducted to retrieve the lost article(s)? Yes No. Reasons if No: _____

What steps have you taken to recover the lost article(s)? _____

Do you have any suspect in mind? Yes No

If Yes, please provide name: _____

Have you ever made similar claims? Yes No

If Yes, from which insurer? _____

A golfer's policy being a contract of INDEMNITY, all claims must be based upon the actual value of the articles at the time of Theft, Loss or Damage, but not exceeding the sums for which they are respectively insured, due allowance being made for depreciation and wear and tear.

Describe items lost damaged	Where & When Purchased?	Original Purchase Price	Deduction for Wear & Tear	Amount Claimed

Please attach all original bills and receipts. Please attach additional listing if space is insufficient

Important Notice: The insured person must, in the event of a claim, advise the company as to any other insurance that they may have covering the same risk.

Declaration: I hereby declare and warrant that all the answers given above to be true. I accept that insurers would be at liberty to deny liability in part or in full if the above written answers are false or inaccurate in any aspect.

Notice for Personal Data Protection Policy

By signing this form:

- i) I/We acknowledge and consent to TMiS collecting, using, processing and disclosing to third party service providers and/or intermediaries, within or outside Singapore, my/our personal data for the purpose of processing and servicing my/our policies/claims;
- ii) I/We declare and confirm that I/we have obtained the consent of the person(s) and/or nominee(s) named herein, where applicable, and that he/she/they has/have authorized me/us to disclose their personal data and to give consent on their behalf for the above collection, use, process and disclosure; and
- iii) I/We acknowledge the detailed Privacy Policy Statement, governing the above, posted at www.tokiomarine.com.sg.

Signature : _____

Date : _____

Name : _____