

AGENCY APPLICATION FORM FOR CORPORATE AGENT

Explanatory Notes on Completion of this Application Form

- Please read all questions carefully. All questions must be answered in full. If any of the questions does not apply to you, please indicate "NA" in the space provided.
- Where indicated with \bigcirc , please tick (\square) in the box provided where applicable.
- Where there is an asterisk (*), please delete whichever is not applicable.

 Please attach the following documents with this application form: Photocopy of your and your nominees' NRIC/Passport Photocopy of your and your nominees' relevant academic and professional certificates A recent passport size photograph of you and your nominee agent(s) and A registration fee of \$\$ 108.00 (inclusive of 8% GST and up to 3 nominees including main applicant) payable to ERGO INSURANCE PTE. LTD. 						
S	ection 1 – Type of Age	ent & Agent Account				
Type of Account : Cash Agent		Credit Agent				
Section 2 – Business Structure						
Type of Business : Sole Proprietor Others (please specify) :		Limited Partnership	Private Limited Company*			
* Please furnish us the following if your comp	any is a Private Limited	Company				
(a) Authorised Capital :						
(b) Paid-Up Capital :						
* An applicant who is a Company registered with the Accounting and Corporate Authority (ACRA) must have a minimum paid-up capital of S\$25,000 at the time of its application and throughout the currency of its registration.						
	Section 3 – Bu	usiness Profile				
(1) Business / Company Name :		(2) Business / Company Re	gistration No.:			
(3) Year of Registration / Year of Incorporation :		(4) GST Registration No.:				
(5) Registered Address :		(6) Business Address:				
(7) Contact Details		(8) Name of Person to Contact:				
Mobile No.: Office Tel No.: Fax No.:		(9) Email Address:				
	15 1 .000					
Section 4 - Personal Particulars Of Sol (1) Name (as in NRIC/Passport) :		(2) NRIC / FIN / Passport N				
(1) Name (as in Nine) assport).		(2) WHICH THEY TRANSPORTE	0			
(3) Marital Status:		(4) Gender:				
*Single / Married / Others :		Male Female (6) Nationality:				
(7) Residential Address : (9) Email Address :		(8) Contact Details Mobile No.: Home Tel No.: Office Tel No.: Fax No.:				



(10) Are you applying as a Nominee Agent of this a ☐ Yes ☐ No If "Yes", please indicate the following:	Agency?				
Type of Agent : General Agent	General & Life Agent (ie Composite Agent)*				
* For Composite Agent, please state name of Life Assurance Company you represent :					
(11) Qualifications a) Highest Academic Qualifications attained: (Minimum academic qualification is 3 GCE 'O' Level OR Basic Competency Examination (BCE) Certificate)					
b) Professional Qualification Attained: Basic Insurance Concepts and Principles (BCP) Personal General Insurance (PGI) Commercial General Insurance (ComGI) Certificate in Health Insurance (CHI) Others (please specify):					
Section 5 –	Details of Current Principals Representation				
(1) GIAS Registration Number :	Details of Current Frincipals Representation				
(2) Name of Insurance Companies/Principals	s you currently represent:				
Primary Principal :					
Secondary Principal 1 :					
Secondary Principal 2 :					
(3) Employment Type :	☐ Full- Time ☐ Part-Time				
	If Part-Time, please state your main Occupation & Name of Employer :				
(4) If you are currently representing 3 Princi application is approved?	pals, which Principal do you intend to cease representing if your agency				
(5) Have you ever been a General Insurance Agent of ERGO Insurance Pte. Ltd.? ☐ Yes ☐ No If "Yes", please provide the period during which you represented ERGO Insurance Pte. Ltd.:					
6) Has your agency agreement with any insurance company ever been terminated previously? ☐ Yes ☐ No If "Yes", please provide the name(s) of insurance company and reason(s) of termination:					
7) Has your agent registration with the GIAS ever been suspended or terminated previously? ☐ Yes ☐ No If "Yes", please provide the date(s) and reason(s) of suspension / termination:					
(8) Has any complaint been lodged against you with the GIAS or FIDREC? ☐ Yes ☐ No If "Yes", please provide the date(s) and nature of complaint(s):					



☐ Yes ☐ No If "Yes", please provide details:					
	Soci	tion 6	- Relations in ERGO Insurance Pte.	1+4	
Are you or any o			e family member (i.e. spouse, parei		n) of the Director and/or
	surance Pte. Ltd.	iculat	e ranniy member (i.e. spouse, parer	into or crimare	in of the birector and of
☐ Yes ☐	No				
If "Yes", pleas	se provide details below				
			I		Γ
Name of Applicant &/or Nominee			Name of Director &/or Staff		Relationship
	Section	7 – B	usiness Volume for all Principals Co	mbined	
Please state you	r current and projected	overa	ll annual production for all Principa	ls combined	
Туре	of Business		Current (S\$)		Projected (S\$)
Motor			• • •		
Non-Motor					
Marine					
	Total				
	Sec	tion 8	- Fit and Proper Criteria & Declara	tion	
			Declaration Form (General Insuranc	e Agent)	
_			Declaration Form (Nominee Agent)		
* Should there is in Agent)	more than 1 Nominee Ager	nt, eacl	n Nominee Agent will have to complete	e GIA's Form C	2 – Declaration Form (Nominee
Agenty					
	Section 9 – Personal Dat	ta Pro	tection Act 2012 (Consent to Disclos	se Personal Ir	nformation)
	nowledge, agree and conse				
			ral Insurance Association of Singapore		
			se, disclose and/or process my person Il information provided by me or pos		
			ch Personal Information to the Monetar		
			in Singapore, for the purpose(s) of :		
i. processing my application to be an agent with ERGO;					
ii. managing, facilitating and/or administering my relationship with ERGO such as but not limited to managing or dealing with my commissions, fees, benefits, if any, terminating my relationship, disciplinary investigation and/or					
disciplinary action arising from my action(s) or omission(s);					
iii.	iii. managing and/or administering activities carried out by me pursuant to my obligations under my agreement with the				
ERGO or in my performance of my obligations in my agreement with the ERGO;					
iv. analyzing, administering and/or managing my transactions and performance targets;v. marketing my services as an insurance agent, to the public or to any third party;					
vi. showcasing or marketing my achievements in relation to my insurance transactions such as but not limited to					
	publication of my image and personal data on public media platforms such as the newspaper, the Internet, the				ne newspaper, the Internet, the
Vii	ERGO in-house notice boards, at marketing exhibitions, the radio etc; vii. considering, proposing, facilitating or sending me for any training that ERGO or GIA, as the case may be, determines				
vii.	suitable for me;	ciiitatii	is or sending the for any training that El	NGO OI GIA, dS	the case may be, determines is
viii.	, , , , , , , , , , , , , , , , , , ,				
÷	requirements, claims, ded		•	alu basis / !	anavar
IX.	 ix. disclosure of my personal data to a credit monitoring bureau on a monthly basis (or whenever necessary) to check on issuance of any bankruptcy petition or order against me; 				ienever
x.					s) in accordance with legal or
regulatory requirements or risk management procedures required by the Monetary Authority of Singapore or that have				-	
	been put in place by ERGO	or Gl	4 ;		

(9) Have you &/or your nominee(s) been declared a bankrupt?



- xi. dealing in any matters relating to, arising from or connected with my relationship with ERGO (including but not limited to the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages), contacting me on matters related to or connected to my relationship with ERGO; and
- xii. complying with applicable law in administering and managing my relationship with ERGO. (collectively the "Purposes")
- b) Any other insurer or company operating insurance business in Singapore (collectively "Other Insurers") may/can collect, may use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- c) my Personal Information may/can be disclosed by ERGO, any of the Other Insurers, GIA, and/or ARB to their third party service providers or agents, which may be sited outside of Singapore, for one or more of the above Purposes.

I/We further hereby declare that the information and statements given in this application form and any accompanying attachments are true and correct and agree that they shall be the basis of the Agency Contract between ERGO Insurance Pte. Ltd. and me/us if this application is approved. I/We also hereby authorise the Registrar to release details of my/our agency and/or nominees representing my/our agency, including details of my/our application with other principals.

Signature of Applicant	Date