

GENERAL INSURANCE ASSOCIATION OF SINGAPORE

The Singapore General Insurance Code of Practice

Revised Copy

(6 Aug 2012)



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The objective of the code is to ensure that the general insurance customer is treated fairly and receives a high standard of service. The code sets minimum standards regulating the sales, advisory and service standards of the general insurer and intermediary (including agents and brokers).

Insurance products and services covered under the code encompass all policies issued to an individual.

Within the code, 'you' refers to the individual customer and 'we' and 'us' refer to the general insurer or intermediary.

1 Our commitments

We promise that we will:

- Act fairly and reasonably when we deal with you.
- Make sure all the information we give you is clear and not misleading.
- Give you enough information and help so that you can make an informed decision before committing to buying an insurance policy.
- Handle your claims fairly and promptly.
- Handle your complaints fairly and promptly.

2 Marketing

2.1 Advertising

We will make sure that all advertising and promotional materials are clear, fair and not misleading.



2.2 Information about products and services

We will explain all the main features of the products and services that we offer, including: -

- Who the insurer is (in the case of intermediaries).
- All the important details of cover and benefits.
- Any significant or unusual restrictions, warranties or exclusions such as frauds and wars.
- Any significant conditions or obligations which you must meet.
- The period of cover.

2.3 Protecting your interest

In order to ensure that your interest as a general insurance customer is protected at all times and that you will obtain the quality products and services we promise you, we advise you to deal only with: -

- Insurers which are Members of the General Insurance Association of Singapore and which have committed in writing to faithfully uphold and apply this Code of Practice;
- 2. Agents who are registered with the Agents' Registration Board; and
- 3. Brokers who are registered with the Singapore Insurance Brokers Association and no others.

If you need any information, please contact the General Insurance Association of Singapore or the Singapore Insurance Brokers Association.

2.4 Confidentiality

 An insurance agent should implement and maintain proper procedures to preserve confidentiality of information it receives from a client or which relates to a client.



- An insurance agent should not collect, use or disclose personal data about a client unless:
 - (a) the client has given his consent to the collection, use or disclosure; or
 - (b) the collection, use or disclosure, is required or authorised under any written law.

3 Helping you to find insurance that meets your needs

3.1 Explaining our service

We will give you enough information and help so that you can make an informed decision before committing to buying an insurance policy.

We will explain the products and services we offer and our relationship with you, including: -

- The type and/choice of products and services we offer.
- Whether we act
 - As your insurer;
 - As agent for the insurer;
 - As broker, independently for you.

3.2 Matching your requirements

- We will use the information that we obtained from you ONLY to assist you in the identification of your needs.
- We will offer products that meet your needs.

3.3 Information on costs

We will provide you with the full details of the costs of your insurance, including: -



- Separate insurance premiums for each of the individual products or services we are offering.
- Details of any fees and charges other than the insurance premium,
 and the purpose of each fee or charge.
- Payment Before Cover Warranty and how it applies to your policy.
- When you need to pay the premium, fees and charges, and an explanation of how you can pay.
- If we are acting on your behalf in arranging your insurance, we will advise you of our commission, should you request for this information.

3.4 'Free Look'

Except for specific policies listed below, for new policies issued to you, we will give you a "Free Look" period of at least 14 business days from the date you receive the policy document. The policy document is deemed to have been received by you within 3 days after we have despatched it.

Should you decide not to continue with the insurance purchased, you can cancel your cover within this period and get all your money back, if you have not made a claim. Cover would not have attached, and no benefits shall be payable under the policy. An administration charge may be imposed by Insurers.

However, this benefit does not apply to: -

- Motor insurance
- Travel insurance
- Domestic maid insurance
- Short term insurance with a term less than 1 year
- Policy renewals
- Any other compulsory insurance stipulated by law



3.5 Conflicts of Interest

A conflict of interests is said to occur where an insurer's employee or the insurance agent has a personal interest that conflicts or might possibly conflict with his role to provide the best possible advice or service to a customer. This may occur as a result of employment / agency relationship, employee's or agent's family or personal relationships with insurer. In circumstances where avoidance of such conflicts of interest may not be practicable, the insurer's employee and/or agent should disclose to the customer the conflict of interest arising from the relationship with the insurer, including any material information or facts that may compromise his objectivity, before the insurance is arranged.

4 Confirming cover

- We will respond to your request for insurance within 3 business days.
- We will confirm cover otherwise within 5 business days after receipt of the required information.
- We will give you enough information to check the details of cover.
- We will provide you with any certificates or documents you need.

5 Despatch of policy

We will despatch the complete policy documents to you within 7 business days from the date of confirmation of cover.



6 Providing ongoing service to you

We will answer any questions promptly and give help and advice to you whenever needed.

6.1 Changes to your policy

We will deal with any changes to your insurance policy promptly including the following: -

- Give you written confirmation of any changes to your policy within 7 business days.
- Give you full details of any premiums or charges that you are expected to pay or that will be returned to you.
- Give you any certificates or documents that you need to have by law.
- Give you a receipt as proof of payment, if you pay by cash. We may not issue receipt if payment is made by cheque.
- Send you any refunds of the premiums, fees or charges due to you
 within 7 business days from the date of endorsement/cancellation or
 according to your payment mode, refunded to your bank or credit
 card account in the next possible billing cycle.
- For Motor Insurance, if you have advised cancellation of the policy, the cancellation will only be effective when we receive the original Certificate of Insurance from you.

6.2 Notice of renewal

We will inform you when you need to renew your policy or when the policy will expire, at least 30 business days before expiry, to allow you to consider and arrange continuing cover. We will: -

- Explain the renewal terms (if offered).
- Advise you of any changes to the insurer, cover or service being offered.



- Bring to your attention the need to disclose material information to insurers.
- If we decide not to renew your policy, we will inform you and provide you with an explanation.
- When your policy is renewed, we will send you the documentation within 7 business days.
- We will make sure you receive all the documentation you need.

7 Claims

We will handle claims fairly and promptly.

7.1 Information on claims procedures

When you first become a customer, we will explain to you:

- How to make a claim.
- Our complaints procedures.

7.2 If you make a claim

If you make a claim, we will follow set procedures and will advise you on claims settlement.

- We will acknowledge your notification of a claim within 3 business days.
- If we need additional information, we will contact you and request that information within 7 business days of the date of your notification of the claim. Note: the information required is typically standard documents, e.g., workshop estimates, original receipts etc.
- You will need to provide all information requested on the claim form and supply all the necessary documents.



- We will give you sufficient guidance to help you make a claim under your policy.
- We will consider and handle your claim fairly and promptly, and tell you how your claim is progressing. We will give you a first update within 15 business days from the date of receipt of all the required documents for our claim processing. We will then update you every 45 business days thereafter.
- If we appoint a service provider to adjust your claim, we will inform you of the appointment and his or her identity and contact details.
- Once we receive all necessary information and have completed a full investigation required to assess your claim, we will decide to accept or decline your claim and inform you of our decision within 7 business days.
- If we cannot deal with all or any part of your claim, we will provide you with a written explanation of our decision.
- Once we have agreed to settle your claim and on receipt of all relevant documents, we will issue the cheque within 7 business days.

8 Documentation

8.1 Information in writing

We will give you any important information in writing.

8.2 Standards of written information

We will make sure that all the written information and documents we send you are clear and not misleading.

9 Complaints

We will handle your complaints fairly and promptly.



9.1 Information on complaints procedures

When you first become a customer, we will give you details of our complaints procedures in our policy or service documentation.

9.2 If you make a complaint to us

To expedite matters, you need to provide us with your details (name, contact numbers, etc.), specific nature of your complaint and supporting documents.

Stage One

- 1. Acknowledge your complaint within 3 business days.
- 2. If we need additional information, we will contact you and request that information within 7 business days of the date of your complaint.
- We will endeavour to resolve all complaints as soon as possible. If your complaint takes longer to resolve, we will contact you and update you on the progress on your complaint within 14 business days of our last communication to you.

Stage Two

If the outcome of your complaint is not handled to your satisfaction, you can write to the Principal Officer of the insurance company to appeal. We will respond to your appeal within 14 business days.



9.3 Insurance Disputes resolution scheme

If you are still dissatisfied with the Principal Officer's response, we will refer you to a dispute resolution organisation, Financial Industry Disputes Resolution Centre Ltd (FIDReC), who acts independently of the insurer.

Contact details are: -

Financial Industry Disputes Resolution Centre Ltd (FIDReC)

112 Robinson Road #13-03

Singapore 068902

Telephone : 63278878 Fax : 63278488

Email : info@fidrec.com.sg
Website : www.fidrec.com.sg

10 Other information

10.1 Copies of the code

Copies of the General Insurance Code of Practice are available free from the GIA website at http://www.gia.org.sg or from the General Insurance Association of Singapore.

10.2 More information

If you have any questions about the code, please contact the General Insurance Association of Singapore (GIA) at the address below.

General Insurance Association of Singapore

180 Cecil Street #07-02

Bangkok Bank Building

Singapore 069546

Tel: 6 2218788

Fax: 6 2272051



Email: feedback@gia.org.sg

11 Disclaimer

Nothing in this code shall give any general insurance customer any right or cause of action whatsoever against GIA or its Members.