Liberty Insurance Pte Ltd

51 Club Street #03-00 Liberty House
Singapore 069428
Tel: (65) 6221 8611
Fax: (65) 6225 6890

Premium Payment Instructions (Credit Card)

Intermediary Name: Lyon Goh

Code: A7452 **Contact No :** 9387-0667

Fax: (Motor) 6225 6890 / (Non-Motor): 6224 7348
Email: motorquotation@libertyinsurance.com.sg (Motor)
Email: heng.yengyong@libertyinsurance.com.sg (Non-Motor)

I hereby authorize Liberty Insurance Pte Ltd to charge my credit card (details below) for the insurance premium due.

Insured Details

Name of Insured	
Mobile Tel Number	
Policy / Vehicle Number	
Class of Insurance	
Period of Insurance	From : _____ To: _____
Premium (including GST)	S$_____

Credit Card Details

Name of Cardholder	
Full Premium deduction	( ) Visa ( ) Mastercard
0% Interest Free Instalment Payment	( ) **Citibank Credit Card Only** ( ) 6 months ( ) 12 months
Credit Card Number	[ ][ ][ ][ ]-[ ][ ][ ][ ]-[ ][ ][ ][ ]-[ ][ ][ ][ ]
Expiry Date	[ ][ ]-[ ][ ][ ][ ]
Cardholder Signature :	Date :

Note:
The liability of the company (Liberty Insurance Pte Ltd) commences only when the proposal/ renewal has been accepted by the company, and premium successfully deducted. Acceptance of premium does not constitute acceptance of liability.

18Aug2011