

CLAIM FORM

To : **JAS Innovation Private Ltd. (Company Registration No. 201933651C)**

2 Venture Drive
#14-02, Vision Exchange
Singapore 608526

From : **[Name of Contracting Home Owner]**

We refer to the Guarantee Terms & Conditions made by JAS Innovation Private Ltd. in my favour. Capitalised terms used in this Claim Form shall have the meanings given to them in the said Guarantee Terms & Conditions.

A. Contracting Home Owner's details

Full name	:	
Identification number	:	
Address	:	
Email address	:	
Local contact number	:	

B. Contracting Service Provider's details

Full name	:	
Identification number / company registration number <i>(individual / entity)</i>	:	
Address	:	
Email address	:	
Local contact number	:	

Date of bankruptcy declaration / winding up (individual / entity)	:	
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C. Contracting Home Owner's bank account details

Full name of beneficiary	:	
Name of bank	:	
Address of bank	:	
Bank SWIFT code	:	
Bank account number	:	

D. Supporting documents for the Claim

Please tick and confirm that the following documentation has been appended before submitting this Claim Form:

All documentation (including but not limited to correspondence between the Contracting Home Owner and the Contracting Service Provider) evidencing that the Contract was entered into as a result of the use of the Company's Referral Services by both of the Contracting Home Owner and the Contracting Service Provider	
All documentation (including but not limited to photographic evidence, if applicable) for the grounds of the Claim	

The Company reserves the right to request for additional supporting documents or evidence to verify the details of the Claim. The Contracting Home Owner's failure to provide such documents will result in the Claim being rejected.

E. Conditions for Payout

Please tick and confirm that **all** of the following conditions have been met before submitting this Claim Form:

I confirm that I have submitted to the Company the Contract duly executed by the Contracting Service Provider and me, within seven (7) days from the date of such execution of the Contract	
I confirm that I have not been refunded (in full or in part) for work or services that have yet to be completed under the Contract	
I confirm that the Contract was not terminated by me; my substantial inducement; or by mutual agreement between me and the Contracting Service Provider	

I confirm that I am not in breach of the Contract	
I confirm that I have not received an offer by the Contracting Service Provider or the Company to remedy my grounds of Claim	
I confirm that I have notified the Company in writing of all litigation, arbitration, administrative proceedings, claims or disputes instituted against me within nine (9) months from the date of the Contract, if any	

In the event that a Claim is rejected, the Company shall not be obliged to provide exhaustive reasons for its decision of rejection. The decision of the Company will (in the absence of manifest error) be final.

Date of submission of Claim Form:

Please sign and indicate your full name

Contracting Home Owner

Name:

Please include date