

PARTICULARS OF RISK TO BE INSURED

1. Period of insurance : From _____ to _____ (Both Dates Inclusive)

Definitions

The term "wages salaries and other earnings" means the employees' total remuneration including overtime value of board and lodging housing accommodation bonuses and any other perquisites in kind or money received by the employees in connection with their employment without any deduction in respect of Employees' Provident Fund Contributions, Income Tax, Holidays with Pay or Contributory Pensions.

Item No.	Occupations of Employees	Est. No. of Employees	Estimated Total Annual wages, salaries and other earnings	For office use		
				Rate (%)	Premium	Classification No.
1						
2						
3						
4						
5						
TOTAL PREMIUM				RM		

2. Place of Employment. In respect of Contract works, please state Title of Contract.

3. Does the above Schedule include all persons in your employ?

☐ Yes ☐ No

4. Are you involved in manufacture, filling, breaking down of gun-powder, nitro-glycerine or any other explosives or toxic material?

☐ Yes ☐ No

5. (a) Are you involved in mining, processing, manufacturing, distributing, storage and/or removal of pure asbestos and/or products made entirely or mainly of asbestos?

☐ Yes ☐ No

(b) Do you use products made entirely or mainly of asbestos?

☐ Yes ☐ No

If Yes, please give details.

6. Has any Insurance Company.

(a) declined your proposal?

☐ Yes ☐ No

(b) refused renewal of your Policy?

☐ Yes ☐ No

(c) required and increased premium or imposed a special condition?

☐ Yes ☐ No

If answer is 'Yes' for the above, please give details.

7. Give full particulars for all injuries and/or death sustained by your employees during the past 3 years.

PAYMENT METHOD	
Total Premium Paid: RM	Please select payment method.
<input type="checkbox"/> Cash	
<input type="checkbox"/> JomPay For payment via JomPay, please provide proof of payment. <div style="float: right; text-align: right; padding-top: 10px;"> <div style="border: 1px solid black; padding: 2px; font-size: 8px;"> Biller Code: 1388 Ref-1: Cover note No/Policy No/EndtNo Ref-2: Agent Code/Name & Contact No </div> </div> <div style="clear: both;"></div> <div style="font-size: 8px; margin-top: 5px;"> JomPAY online at Internet and Mobile Banking with your Current, Savings or Credit Card account </div>	
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard </div> <div style="text-align: center;"> Card No. <div style="display: flex; justify-content: center; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div> - <div style="border: 1px solid black; width: 20px; height: 20px;"></div> - <div style="border: 1px solid black; width: 20px; height: 20px;"></div> - <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div> </div> <div style="text-align: right; margin-top: -20px;"> Expiry Date <div style="display: flex; justify-content: flex-end; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">m</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">m</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">y</div> </div> </div>	

 Cardholder's Name:

 Date: Cardholder's Signature: