

Proposal Form

Home Care Insurance

A copy of the **Product Disclosure Sheet (PDS)** is available at our Customer Service Centre, branch offices or our intermediaries. Please make sure that you have read and understood the contents of the **PDS** before purchasing the product.

Berjaya Sompo Insurance Berhad (Registration No. 198001008821 (62605-U)) (BSIB) is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.

Berjaya Sompo Insurance Berhad is a member of Perbadanan Insurans Deposit Malaysia (PIDM). For more information, kindly contact PIDM at 1-800-88-1266 or visit the PIDM website at www.pidm.gov.my.

IMPORTANT NOTICE ON PRE-CONTRACTUAL DISCLOSURE AND REPRESENTATION

Consumer Insurance Contract

Pursuant to Schedule 9 of the Financial Services Act 2013, you must take reasonable care to ensure that all your answers to the questions are to the best of your knowledge, full, complete, correct and honest. You also have a duty to inform us of any change in the details or information given to us before we issue the Policy to you, or before you renew or change any of the terms of your Policy. If you fail to do so, your Policy may be cancelled or treated as if it never existed, or your claim may be rejected or not fully paid.

Non-Consumer Insurance Contract

Pursuant to Schedule 9 of the Financial Services Act 2013, if you are applying for this insurance for purposes of your trade, business or profession, you have a duty to disclose any matter you know to be relevant to our decision in accepting the risks and determining the rates and terms of your insurance. You also have a duty to inform us of any change in the details or information given to us before we issue the Policy to you, or before you renew or change any of the terms of your Policy. If you fail to do so, your Policy may be cancelled or treated as if it never existed, or your claim may be rejected or not fully paid.

The above duty of disclosure for Consumer and Non-Consumer Insurance Contract shall continue until the time your contract of insurance is entered into, varied or renewed with us.

In addition to answering the questions in this proposal form, you are required to disclose any other matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied. You also have a duty to tell us immediately if at any time after your contract of insurance has been entered into, varied or renewed with us any of the information given in this proposal form is inaccurate or has changed.

Please use BLOCK letters and CROSS (X) in appropriate box

PARTICULARS OF PROPOSER

Name of Proposer (as per new NRIC/Passport/Co. Registered Name):	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female												
Correspondence Address: Postcode:	Tel. No. (H/P): Tel. No. (Home/Office): E-mail:												
NRIC No./Passport No.:	Date of Birth: <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>/</td><td></td><td></td><td></td><td>/</td><td></td><td></td><td></td><td></td></tr></table>				/				/				
			/				/						
Company Registration No.:	Occupation:												

PARTICULARS OF PREMISES TO BE INSURED

Period of Insurance:	From:		To:		(both dates inclusive)
SECTION 1 – HOUSEOWNER INSURANCE (Private Dwelling constructed of bricks/concrete walls, reinforced concrete floor and roofed with tile/concrete/asbestos)					
Location of Risk:					
Postcode:	Year of construction:	No. of Storeys:			

Building type:	<input type="checkbox"/> Bungalow	<input type="checkbox"/> Semi-Detached House	<input type="checkbox"/> Terrace House	<input type="checkbox"/> Flat
	<input type="checkbox"/> Apartment	<input type="checkbox"/> Condominium	<input type="checkbox"/> Town House	<input type="checkbox"/> Others

Total value to be insured (building including fixtures and fittings but excluding foundation) :	RM	<u>Sum Insured</u>
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		

Perils/Extension of Cover required :	<input type="checkbox"/> Riot, Strike and Malicious Damage	<input type="checkbox"/> Subsidence and Landslip
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Name of Mortgagee/Chargee (if applicable) :

SECTION 2 – HOME CONTENTS ALL RISKS INSURANCE (Household goods and personal effects of the proposer or any member of his family residing with him)

Total value to be insured: **RM**

Please specify those articles of their value **exceed five (5)%** of the total value to be insured:

Item	Description of the Article(s) (Including Model/Serial Nos.)	Date of Purchase	Sum Insured (RM)
Total			

If space is insufficient, kindly attach a separate sheet.

Note - The total value of platinum, gold and silver articles, jewellery and furs shall be deemed not to exceed one-third (1/3) of the Total Sum insured under this Section.

SECTION 3 – WORLDWIDE PERSONAL ALL RISKS INSURANCE (for items that will be carried/worn by proposer worldwide and each item is covered up to RM3,000)

Item	Description of the Article(s) (Including Model/Serial Nos.)	Date of Purchase	Sum Insured (RM)
Total			

If space is insufficient, kindly attach a separate sheet.

SECTION 4 – WORLDWIDE FAMILY LIABILITY INSURANCE

Is cover required? ☐ Yes ☐ No

GENERAL QUESTIONNAIRES

(1) Are the buildings to be insured in a good state of repair and maintained regularly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(2) Have you made any claims within the past three (3) years such as fire, theft or accidental damage?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please provide details _____		

PAYMENT METHOD - Please select payment method below

Total Premium Paid	RM
<input type="checkbox"/> Cash	<div style="display: flex; justify-content: space-between;"> <div> Berjaya Sompo Insurance Berhad A/C – 8008943580 </div> <div style="border: 1px solid black; padding: 2px; font-size: x-small;"> Billir Code: 1388 Ref-1: Cover note No/Policy No/EndtNo Ref-2: Agent Code/Name & Contact No </div> </div>
<input type="checkbox"/> JomPay	For payment via JomPay, please provide proof of payment. <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="font-size: x-small;"> JomPAY online at Internet and Mobile Banking with your Current, Savings or Credit Card account </div> </div>
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	<div style="display: flex; justify-content: space-between;"> <div> Card No. <div style="border-bottom: 1px solid black; width: 100%;"></div> </div> <div> Expiry Date <div style="display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 40%;"></div> <div style="border-bottom: 1px solid black; width: 40%;"></div> </div> </div> </div>
Cardholder's Name:	
Date:	<div style="display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 40%;"></div> <div>Cardholder's Signature:</div> <div style="border-bottom: 1px solid black; width: 40%;"></div> </div>

SERVICE TAX - The Premium payable by you shall be subjected to service tax pursuant to the Service Tax Act 2018, including any subsidiary legislations, orders or regulations governing the application of such tax, as may be imposed or amended by the relevant authorities from time to time.

PRIVACY NOTICE

The Personal Data provided by and collected from you may be used and processed by us in order for us to provide our services in accordance with our Privacy Notice, which explains how we treat your Personal Data. Please refer to our Privacy Notice which is available on our website at www.berjayasompo.com.my for details. You may contact us for access to or correction of your Personal Data, or for any other queries or feedback.

ACKNOWLEDGEMENT

I/We acknowledge that the answers/information provided in this proposal form are true and correct and I/we have not withheld any information or made any misrepresentation likely to affect the acceptance of this proposal. I/We shall undertake to notify the Company when there is any subsequent change to the information provided in this proposal form. I/We understand and acknowledge receipt of a copy of the **Product Disclosure Sheet (PDS)** which has/have been made available to me/us. I/We acknowledge that the key contract terms have been adequately explained to me/us and I/we fully understand the terms.

Date:

Proposer's Signature:
(If the Proposer is a company, authorised signature(s) and chop)