

Marine Hull Insurance

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

Berjaya Sampo 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.

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.

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.

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.

PARTICULARS OF PROPOSER

[illegible][illegible]

Postcode

Tel No. (H/P)

Tel No. (Office)

E-Mail

- a. Year's experience in shipping :
- b. Other vessels owned or managed :

Date of Loss	Nature of Loss	Amount of loss incurred

4. Details of each vessel to be insured (if a fleet, please provide a full schedule):

Sum Insured	
Vessel Name	
Condition of Vessel	<input type="checkbox"/> New <input type="checkbox"/> Refurbished/Rebuilt
Year of built (** follow the original year built)	
GRT	
Type of vessel	
Vessel Classification	
Cargoes carried	
Dimension (Length x Breadth x Depth)	
Purpose of use (Applicable to Yacht only)	Private/Commercial use
Other Equipments and Installations onboard of vessel, if any	Description : Sum Insured :
Date of last survey <i>Please provide a copy of survey report, if any</i>	

5. Trading routes/trading areas:

6. Applicable to Yacht / Passenger Vessel
- Berthing/Mooring Location
 - Security at Berthing/Mooring Location:
 - Details/frequency of usage:
 - Years of experience of Ship's Captain

7. Has Applicant ever had a H&M Policy cancelled by Insurers? ☐ Yes ☐ No

Additional Information:

PAYMENT METHOD

Total Premium Paid: RM Please select payment method.

☐ Cash

☐ JomPay For payment via JomPay, please provide proof of payment.



Biller Code: 1388
 Ref-1: Cover note No/Policy No/EndtNo
 Ref-2: Agent Code/Name & Contact No

JomPAY online at Internet and Mobile Banking with your Current, Savings or Credit Card account

☐ Visa

Card No.

- - -

Expiry Date

/

☐ MasterCard

Cardholder's Name:

Date:

Cardholder's Signature:

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.berjaysompo.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)

FOR AGENT / OFFICE USE

Cover Note / Policy No.:

Intermediary:

Account No.:

Remarks: