

Proposal Form

Machinery Breakdown 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

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 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.

or has changed.	
Please use BLOCK letters and CROSS (X) in appropriate box	
PARTICULARS OF PROPOSER	
Name of Proposer (in full):	
Address (Postal):	
	Postcode
NRIC No.:	E-Mail:
Business Registration No.:	Business, Trade or Occupation:
Tel. No. (House):	Tel. No. (H/P):
Tel. No. (Office):	Fax No.:

PARTICULARS OF RISK TO BE INSURED	
1. Address of plant:	
Nature of business:	
Name of business:	
Name of chief engineer or plant manager:	
Nearest railway station / airport:	
2. Period of insurance: From to	
Has any of the machinery to be insured previously been covered by other companies? If so, which items of the specification and by what companies?	☐ Yes ☐ No
4. Do you wish to insure the foundations of the machinery? If so, please state the relevant items of the specification.	☐ Yes ☐ No
5. Does the specification includes all the machinery coverable under a Machinery Policy?	☐ Yes ☐ No
If not, does the machinery to be insured represent all the machinery coverable in one plant section?	☐ Yes ☐ No
6. Do you wish the cover to include extra charges (in case of loss) for:	
Express freight, overtime, night work, work on public holidays?	☐ Yes ☐ No
Air freight?	☐ Yes ☐ No
Limit of indemnity for air freight:	
7. Give details of any special extension of cover required.	

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 ☐ MasterCard	Card No. Expiry Date m m / y y				
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.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				
FOR AGENT / OFFICE USE					
Cover Note / Policy No.:					
Intermediary:					
Account No.:					
Remarks:					

Item No.	Description of items	Year of manufacture	Remarks	Replacement value
140.	Please give full and exact description of all machines, including name of manufacturer,	manufacture	Give particulars of any part of the machinery to be insured which has had a breakdown or	Please state current cost of replacing the machine by new machinery of the same kind and capacity (including oil in the case
	type, output, capacity, speed, load, weight, voltage, amperage, cycles, fuel, pressure, temperature, etc.		failure during the last three years, which shows any signs of repair, or which is exposed to any special risk.	of transformers and switches) plus freight charges, customs duties, costs of erection and also value of foundations, if the latter are to be insured.
	ı	1		Total