

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 <i>(** follow the original year built)</i>	
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 [m][m] / [y][y]
 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: