

Liberty General Insurance Berhad 197801007153(44191-P)

Formerly known as AmGeneral Insurance Berhad

Liberty Insurance Tower, CT9, Pavilion Damansara Heights,3, Jalan Damanlela, Pusat Bandar Damansara, 50490 Kuala Lumpur.

P.O. Box 11228, GPO Kuala Lumpur, 50740 Kuala Lumpur

Tel: 03 2268 3333 Website: www.libertyinsurance.com.my (Service Tax Registration No.: B16-1808-31015443)

All Risks (Office Equipment) Insurance **Proposal Form**

Non-Consumer Insurance Contract

Pursuant to Paragraph 4(1) of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance for a purpose related to your trade, business or profession, you have a duty to disclose any matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied and any matter a reasonable person in the circumstances could be expected to know to be relevant, otherwise it may result in avoidance of your contract of insurance, refusal or reduction of your claim(s), change of terms or termination of your contract of insurance.

The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us. 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.

INTERMEDIARY :	ACCOUNT NO. :	POLICY NO. :
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PROPOSER'S DETAILS (P	lease use BLOCK LETTERS / tick ($ m v$) appropriate box)
Name of Proposer	
Business Registration No.	
Postal Address	
	Postcode
Nationality	[] Malaysian [] Others :
Passport No.	
Passport Expiry Date	
Name of Mortgagee / Chargee (if applicable)	
Period of Insurance	From: To: Year of building build:
Service Tax Registration	[] Yes [] No If "Yes", please provide Service Tax No. & Registration date
SCHEDULE DATA.	
Situation of Risk	
	Postcode
Occupation	
Construction	Wall :
	Roof :
	Floor :

Item No.	Description of Property	Sum Insured (RM)
	Total RM	

Others _

BASIC COVER : Loss or damage by Accident or Misfortune Whilst Within the Situation of Risk

OTHER EXTENSIONS REQUIRED :

Strike, Riot & Malicious Damage.

GENE	RAL QUESTIONS.	
1.	Have you ever made a claim in connection with the property stated above?	Yes No If "Yes", please give full particulars
2.	Has any insurer in respect of any the risk to which this proposal applies declined to insure you or required special terms to insure you or refused to renew your insurance?	Yes No If "Yes", please give full particulars
3.	Whether you are sole occupier?	Yes No If "No", please give full particulars

DECLARATION

I/We hereby declare that I/We have fully and accurately answered all the questions above and matters which are relevant to the consideration of my/our proposal have been disclosed. I/We understand that non disclosure or misrepresentation of a material fact will entitle you to avoid this policy and agree that this proposal form and all written information which is provided are incorporated in and form the basis of any contract of insurance.

Signature of Proposer	Name	NRIC No.	Date

FOR OFFICE USE			
Total Premium	:		
Subject to the prevailing rate a imposed by the Government of Malaysia			
Stamp Duty	:	RM	10.00
Grand Total	:		

PREMIUM WARRANTY

- 1. Your attention is drawn to the 60 days Premium Warranty attached to the Policy. By this warranty, the insurance policy is automatically cancelled unless the full premium is paid to the Company within 60 days from the commencement date of cover.
- 2. No cover is in force until this Proposal has been accepted by the Company.

MARKETING AND CONSENT TO TRANSFER ABROAD

Liberty General Insurance Berhad strives to introduce new products and improve services in your best interests. The Personal data may be used by the Liberty General Insurance Berhad and their agents, parent company and/or affiliates (within its financial group) to keep you informed by email, telephone, post or by such other means, of services and/or products and would like to know the best way to keep in touch with you.

YES, I wish to be contacted via :
E-mail Telephone Post
No, I do not wish to be contacted for such purpose.
In certain cases, Liberty General Insurance Berhad may also share limited personal data with third parties outside its financial group for marketing purposes and may also transfer abroad the personal data to entities outside Malaysia who may act on behalf of Liberty General Insurance Berhad and /or any member of the Liberty Mutual Group of Companies provided always that you have expressly consented to our doing so. Please indicate below if you consent to such disclosure.
I agree to Liberty General Insurance Berhad disclosing my information to third parties outside its financial group for marketing purposes and to the transfer abroad of my personal data.
Yes No

ACKNOWLEDGEMENT AND CONSENT						
I hereby confirm that I have read, understood and agree to be bound by the terms of the Liberty General Insurance Berhad Privacy Notice (which is available at <u>www.libertyinsurance.com.my</u> or has been made available to me) and consent to the processing of my Personal data as described in the Liberty General Insurance Berhad Privacy Notice and this Proposal Form.						
Full Name	:		Signature	:		
Date	: _		NRIC	:		

FOR OFFICE USE - VERIFICATION OF IDENTITY.	
In compliance with Section 66(B) and 66(D) of the Anti-Money Laun	dering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001.
Please tick (✓) as appropriate.	
I hereby declare that the Proposer's details had been verified agains	st the following original documents.
National Registration Identity Card (NRIC)	Certificate of registration Others (please specify)
Signature:	NRIC No:
Name:	Date:

Important Note (1)	mportant Note (2)		
1. The following persons are authorised to verify the above details Pe	Pursuant to the Anti-Money Laundering and Anti-Terrorism Financing		
Staff of Liberty General Insurance Berhad as authorised by the (E	Declaration of Specified Entities and Reporting Requirements) Order		
Company. 20	2014 which is issued under Sections 66B and 66D of the AMLATFA, all		
Registered agents of Liberty General Insurance Berhad. in	nstitutions are required to:		
2. Copies of documents verified for the following insurance policies must	• Freeze without delay all property owned, undertaking owned or		
be retained.	controlled directly or indirectly by the specified entity; and/or		
Policies with premiums exceeding RM50, 000 per annum in respect	Reject or block any transaction by the specified entity.		
of single policies issued to individuals institutions.			
Policies with premiums exceeding RM100,000 per annum in respect			
of group policies.			