

Houseowner / Householder Insurance Proposal Form

SCHEDULE 9 OF THE FINANCIAL SERVICES ACT 2013 (FSA)

IMPORTANT NOTICE

Consumer Insurance Contract

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance wholly for purposes unrelated to your trade, business or profession, you have a duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form. You must answer the questions fully and accurately.

Failure to take reasonable care in answering the questions 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.

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.

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.

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 Insurer within 60 days from the commencement date of cover. Please note that if this Insurance is transacted through your Insurance Broker, the Broker is acting on your behalf for the purpose of formation of this contract of Insurance. It is important that you make full payment of the premium to your Broker as soon as possible and in any case within the 60 days period of the premium warranty so as to enable your Broker to remit the premiums early to your Insurer. You are advised to request your Broker to furnish you with the Broker's and Insurer's receipt on the premium that you paid.

0442/7/P/G/S/M QF/GTS/PF/0-003/03Rev05

For	Offic	ce Use Only	Cover Note		Agent	Policy No.		
Full	Nan	ne of Proposer						
Busi	ness	Registration N	o./IC No					
Cor of P		ondence Addre oser						
						Post Code	!	
Nan	ne o	f Mortgagee/Ch	nargee (if applicabl	e)		Bank Ref. No.		
Period of Insurance F			-rom		To	(both dat	es inclusive)	
Prer	nises	s at which the i	nsurance is require	d				
						Post Code		
1.	a)		crete, metal or abe	-		ne or concrete and roofed with of construction of roof and	Yes	No
		Roof		_ External Walls				
	b)	Are there any	outbuildings and,	if so, how are th	ney constructed?		Yes	No
		i) Walls		ii)	Roof			
	c)	Building Heigh	nt			_ storey(s)		
	d)	Year of Const	ruction					
2.	Ple a)	Detached Priv	ature of your reside vate Dwelling Hous nall out-houses)			om the nearest building		
	b)	Non-detache	d Private Dwelling	House				
	c)	Flat / Apartm	ent / Condominiun	n				
3.		_	ely occupied by your er of other tenants,	•	ly and servants? ers or paying guests.		Yes	No
4.	 Is t	here any busine	ess. trade or proces	s of manufactur	re carried on in any c	of the buildings specified	Yes	No
		ove?	, ,		,	5 1		
	(If the dwelling is a flat over shop or other premises please indicate nature of business carried on in such premises)				1			
5.	Will the dwelling regularly be left unoccupied? (Attention is drawn to a Proviso in the Policy that cover against Theft will be suspended for any period			Yes	No			
	or	or period in excess of 90 days in any one period of insurance during which the dwelling be left without an inhabitant therein unless specially agreed to by the Company).						
6.	Are	e the buildings	n a good state of r	epair and will th	ney be so maintained	1?	Yes	No
							_	

7.	Is in	surance required against:			
	a) i	Extension for extended theft cover but excluding theft by domestic servant or any member of your family or household (under Contents only)	0.250%	Yes	No
	i) Extension for extended theft cover including theft by domestic servants (under contents only)	0.375%	Yes	No
	b) F	Riot, Strike and Malicious Damage (under Building and/or Contents)	0.010%	Yes	No
	c) A	Accidental damage to plate glass (under Buildings only)	0.050%	Yes	No
	t	Rent Insurance under Additional Benefit (E) of the policy in excess of the 10% of he Total Sum Insured on Building and/or Contents Rate : Building / Contents whichever is applicable		Yes	No
	e) i	Subsidence & Landslip (under Building and/or Contents)	0.081%	Yes	No
	i	 Extended to cover item (a) of this Optional Benefit with payment of additional premium based on a separate sum insured. (under Building and/or Contents) 	0.10125%	Yes	No
	(Not	e: Rates will be quoted on application for items (a) to (e) above)			
8.	Has	Yes	No		
	a)	Declined to insure you?			
	b)	Required special terms to insure you?			
	c)	Cancelled or refused to renew your insurance?			
	d)	Increased your premium or imposed special terms on renewal?			
	If so	, please give full particulars			
9.	Have the Buildings and/or Contents suffered damage by hurricane, cyclone, thypoon, windstorm or flood during the past five years? If so, please give particulars.			Yes	No
10.	Have you ever sustained loss from any of the contingencies including covers required in Q7 to be insured against?			Yes	No
	If so	, please give full particulars			
11.	Have	e you any other policies in force covering any of the contingencies to be insured again	ist?	Yes	No
	If so	, please give full particulars			
12.	Is th	is proposal in lieu of any insurance with this Company?		Yes	No
	If so	, please give full particulars			

PROPERTY TO BE INSURED

The SUM to be insured must represent FULL VALUE of the property, the Proposer being required to sign a declaration to that effect below. The insurance will be subject to average, which means that if at the time of loss or damage the sum insured is less than the full value of the property insured the amount payable is proportionately reduced.

BUILDING

The Proposer's Private Dwelling House or Flat / Apartment / Condominium and all the Domestic Office, Stables, Garages and Out-Buildings used solely in connection therewith and on the same premises including Fixtures and Fittings therein and the Walls, Gates and Fences around and pertaining thereto.

CONTENTS

On Household Goods and Personal Effects of every description (except as aftermentioned) the property of the Proposer or any member of the Proposer's family and domestic staff normally residing with the Proposer in the Proposer's Private Dwelling and all the Domestic Offices, Stables, Garages and Out-buildings used solely in connection therewith and on the same premises.

No one article (furniture, pianos, organs, household appliances, radios, television sets, video recorder sets, Hi-Fi equipment and the like excepted) will be deemed of greater value than five (5) per cent of the Total Sum Insured on the said Contents unless such articles is specially declared as a separate item.

IMPORTANT NOTES

- 1. The value of Platinium, Gold and Silver Articles, Jewellery and Furs payable under the Policy is limited to one-third of the Total Sum Insured on Contents.
- 2. This Policy is for Private Dwelling and/or Contents contained therein, occupied solely for residential purposed or residential and domestic office purposes. No manufacture or deposit or storage of merchandise may be allowed in the Private Dwelling or in any portion of the premises of which the Private Dwelling forms a part.
- 3. This Policy does not cover property more specifically insured or, unless specially mentioned declared herein:

Deeds, Bonds, Bills of Exchange, Promisory Notes, Cheques, Securities for Money, Stamps, Documents of any kind, Cash, Currency Notes, Bank Notes, Manuscripts, Medals and Coins, Motor Vehicles and Accessories

BUILDING

DESCRIPTION OF PROPERTY TO BE INSURED	Sum Insured (RM)	Office Use Only
		Rate / Premium
1. Building		
2. Removal of debris		
3. Architects, Surveyors and Consulting Engineers' Fees		
	Total	

CONTENTS

DESCRIPTION OF PROPERTY TO BE INSURED	Sum Insured (RM)	Office Use Only
		Rate / Premium
Contents		
Specify here any such articles of greater value than five (5)		
percent of the Total Sum Insured on the said Contents		
Please attach a separate sheet if space provided is inadequate	Total	

CONSUMER INSURANCE CONTRACT

DECLARATION AND SIGNATURE

I/We understand that it is my/our duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form and I/we hereby declare that I/we have fully and accurately answered the questions above.

I/We further agree to accept indemnity subject to the conditions in and endorsed on the Company's Policy and to pay the Premium thereunder within sixty (60) days from the inception date of the Policy.

I/We also declare that **THE TOTAL SUMS TO BE INSURED REPRESENT NOT LESS THAN THE FULL VALUE OF THE PROPERTY**, as above mentioned, and I/We agree that no insurance shall commence until the Proposal has been accepted by the Company.

I/We hereby give my/our unconditional and unequivocal consent to you and all your related companies to process my/our personal data revealed hereto. You are at liberty to process the data and share the information revealed thereto with any of your service providers and your other related companies provided that the revelation of my/our personal data strictly for the purposes in relation to the insurance which I/we have applied hereto. The consent given hereto is in line with the requirement set forth in the Personal Data Protection Act 2010.

to the insurance which I/we have applied hereto. The consent given hereto is in line with the requirement set forth in the Personal Data Protection Act 2010.				
For details of our privacy notice, please visit www.zurich.com.my				
Date Signature of Proposer				
NON-CONSUMER INSURANCE CONTRACT				
DECLARATION AND SIGNATURE				
I/We hereby declare that all questions have been answered fully and correctly and to the best of my/our knowledge. I/We are not withholding any information or facts relevant to the consideration of this proposal.				
I/We further agree to accept indemnity subject to the conditions in and endorsed on the Company's Policy and to pay the premium thereunder within sixty (60) days from the inception date of the Policy.				
I/We also declare that THE TOTAL SUMS TO BE INSURED REPRESENT NOT LESS THAN THE FULL VALUE OF THE PROPERTY , as above mentioned, and I/We agree that no insurance shall commence until the Proposal has been accepted by the Company.				
I/We hereby give me/our unconditional and unequivocal consent to you and all your related companies to process my/our personal data revealed hereto. You are at liberty to process the data and share the information revealed thereto with any of your service providers and your other related companies provided that the revelation of my/our personal data strictly for the porposes in relation to the insurance which I/we have applied hereto. The consent given hereto is in line with the requirement sset forth in the Personal Data Protection Act 2010				
For details of our privacy notice, please visit www.zurich.com.my				

Signature of Proposer ___

To be completed by Insurance Agents, Insurance Brokers or Staff of Insurance Companies

ANTI-MONEY LAUNDERING, ANTI-TERRORISM FINANCING AND PROCEEDS OF UNLAWFUL ACTIVITIES ACT 2001 (AMLATFPUAA2001) (VERIFICATION OF IDENTIFICATION OF PROPOSER)

In compliance with Section 16(3) of the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001 (AMLATFPUAA 2001), I hereby certify that the Applicant's original NRIC No/Business Registration Certificate was verified and authenticated by me at the point of sales.

Third party verification					
	Name				
	New NRIC No				
Signature of Insurance Agents, Insurance Brokers or Staff of Insurance Companies	Date				

Note: A copy of the Proposer's New NRIC/Business Registration Certificate for Individual Insurance Policy must be submitted together with this proposal if the Premium exceeds RM50,000.

IMPORTANT NOTICE

All premium and fees shown in this document may be subject to tax or other government levies.

