

Z-TRAVEL INSURANCE (DOMESTIC/INBOUND)

PROPOSAL FORM

IMPORTANT NOTE

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 in this Proposal Form 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.

GOODS AND SERVICES TAX ('GST')

Important Notice:

Please be informed that the Goods and Services Tax ('GST') will be implemented by the Government of Malaysia with effect from 1 April 2015 at a rate of six (6) per centum.

Zurich General Insurance Malaysia Berhad reserves the right to collect from you an amount equivalent to the GST payable on the applicable premium for the policy period, or in the event that the policy period commences before but expires after 1 April 2015, to collect from you an amount equivalent to the GST payable on the applicable premium calculated from 1 April 2015 on a pro-rated basis.

Your obligation to pay GST shall form part of the Terms and Conditions in your insurance policy.

Z-Travel Insurance (Domestic / Inbound) PROPOSAL FORM

AGENT CODE: _____ (For Office Use Only)

A. DETAILS OF PROPOSER

Name of Proposer

Company Registration No. (If applicable)

Goods and Services Tax (GST) Registration No.

Goods and Services Tax (GST) Registration Date

NRIC / Passport No.	Nationality	Date of Birth
Correspondence Address		
City	Postcode	State
Contact No.	Email Address	
Gender	<input type="radio"/> Male <input type="radio"/> Female	
Marital Status	<input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Others	

B. INSURANCE REQUIREMENTS

Cover Type

☐ Insured Only
 ☐ Insured and Spouse
 ☐ Family (Insured including legal Spouse and/or Children)

Destination: (Within Malaysia only)

Travel Period: From DD / MM / YYYY To DD / MM / YYYY (both dates inclusive)

C. PARTICULARS OF INSURED PERSON

	Name of Insured Person (as per NRIC / Passport No)	NRIC No. / Passport No.	Relationship with Proposer	Z-Travel Basic Cover Sum Insured & Premium (RM) (From Min. RM10,000 or up to Max. RM200,000)	Z-Travel Optional Cover (RM) (Additional Premium RM30)	Gross Premium (RM)
1	Proposer (as above)					
2						
3						
4						
5						
Total Gross Premium :						RM
GST (6%) :						RM
Stamp Duty :						RM 10.00
Total Premium Payable :						RM

**Note: Minimum premium is RM20 per policy*

D. NOMINATION

I hereby nominate the following as nominee(s):

	Name of Nominee	NRIC No. / Passport No.	Relationship	% of Share
1				
2				
3				
4				

If your intention is for nominee(s) named herein to receive the policy benefits beneficially and not as an executor, then you must assign the benefits of the policy to person(s) using the Conditional Assignment Form.

- Note:
- 1) The witness must be at least 18 years of age and cannot be named nominee.
 - 2) A nominee of a Muslim policy owner upon receipt of policy money should distribute the policy moneys in accordance with Islamic Law.
 - 3) Pursuant to Paragraph 5 Schedule 10 Financial Services Act 2013 , a trust is automatically created if the nominee is a:
 - i) spouse,
 - ii) child, or
 - iii) parent who is being nominated when there is no spouse or child living at the time of making the nomination.

E. DECLARATION BY PROPOSER

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.

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 agree that this Declaration and the answers above given, as well as any proposal or declaration or statement made in writing by me/ourselves or any one acting on my/our behalf shall form the basis of the Contract between me/ourselves and the Company, and I/we further agree to accept indemnity subject to the conditions in and endorsed on the Company's Policy.

Signature of Proposer	Signature of Witness
Name. _____	Name. _____
NRIC No. _____	NRIC No. _____
DD / MM / YYYY _____	DD / MM / YYYY _____

Important Notice

1. The policyholder is hereby notified that the company has appointed agents who have the authority to solicit or negotiate contracts of insurance on behalf of the company.
2. Please ensure that you have received the receipt/proof of payment from the Company or appointed agents.
3. We advise you to read the terms of Policy and seek clarification if you are unsure of certain policy terms or conditions. A specimen policy is available upon request.

To be completed by Insurance Agents, Insurance Brokers or Staff of Insurance Companies relating to the Anti-Money Laundering and Anti-Terrorism Financing Act 2001

ANTI-MONEY LAUNDERING AND ANTI-TERRORISM FINANCING ACT 2001 (VERIFICATION OF IDENTIFICATION OF PROPOSER)

Name of Proposer

Business Registration No.
/ NRIC No.

In compliance with Section 16(2) of the Anti-Money Laundering And Anti-Terrorism Financing Act 2001, I hereby certify that the Proposer's original New NRIC / Business Registration Certificate was verified and authenticated by me at the point of sales.

Third Party Verification

Signature of Insurance Agents, Insurance
Brokers or Staff of Insurance Companies

Name

New NRIC No.

Date

D	D	M	M	Y	Y	Y	Y
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Note:

A copy of the Proposer's New NRIC/Business Registration Certification must be submitted together with this proposal if the Premium exceeds RM50,000

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