

Dear Valued Customer,

- 1) Please return completed form to Koo Agency by email (kooagency@yahoo.com) or fax (Fax No.: 03-80249046)
- 2) Payment can be made by Online Transfer or Bank In to KOO AGENCY Maybank Account No.: 512361144193

**SECTION 149(4)  
INSURANCE ACT 1996**

You are to disclose in this proposal form fully and faithfully all the facts which you know or ought to know otherwise, the policy issued hereinafter may be void

## Domestic Maid Insurance Scheme (DMIS) Proposal Form

Agency Account No. **D00557-000**

### Employer's Particulars

Name of Proposer / Employer

Home Address

Passport No. / NRIC No.

Nationality

Occupation

Tel No.

### Maid's Particulars

Name of House Maid

Passport No. / NRIC No.

Nationality

Period of Insurance

From

D	D	M	M	Y	Y	Y	Y
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To

D	D	M	M	Y	Y	Y	Y
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### Declaration

I hereby confirm to the best of my knowledge that the statements contained herein are true and I have not withhold any information which might influence the acceptance of this proposal and that the warranty hereby given shall be the basis of the contract with **Zurich Insurance Malaysia Berhad**.

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.

Signature of Employer

Date

D	D	M	M	Y	Y	Y	Y
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