AXA Affin General Insurance Berhad (23820-W)
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Proposal Form

Property Management Insurance Package

Date:

IMPORTANT NOTES

1. 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 the Proposal Form (or when You applied for this insurance) is inaccurate or has changed.
2. The personal data submitted by and collected from You may be used by Us and/or any company within the AXA Group of companies and/or any of its associated companies, within or outside Malaysia, for administration or direct marketing purposes and in this connection, We may transfer or disclose that information to any of those other companies. We will cease to use the Personal Data for direct marketing purposes if You request Us to do so. For further details, please refer to Our "Data Privacy Notice" stipulated in Our website.
3. 60 Days PREMIUM WARRANTY: 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.
4. No cover is in force until the proposal has been accepted in writing by the Company.
5. Premium charged for this Policy exclude applicable tax(es) that would be imposed in the future and from time to time, We will be entitled to recover from You any taxes that We are required by law to collect.

SPECIAL NOTIFICATION
The Proposer is hereby notified that the Company has appointed Intermediaries/Representatives who have the authority to solicit or negotiate Contracts of Insurance on behalf of the Company. All authorised Intermediaries/Representatives are issued with authorisation cards.

1. **ALL QUESTIONS MUST BE FULLY ANSWERED - TICKS OR DASHES WILL NOT SUFFICE**
   (If more space is required, please write on seperate sheet of paper and attach herewith)
2. **PLEASE WRITE IN BLOCK LETTERS AND IN BLACK INK**
3. **PLEASE TICK (✓) WHERE APPROPRIATE**

A. PARTICULARS OF PROPOSER

Name of Company/Name* (as in new NRIC/Passport)		
Correspondence Address*:		
Postcode*:	Co. Registration No.:	Email*:
Contact Person:		New NRIC/Passport No.*:
Nationality*:	Position:	Date of birth*: dd/mm/yy
Tel. No. (H/P)*:	Tel. No. (Office):	Tel. No. (Home):
Marital status*: ☐ Single ☐ Married ☐ Other	Gender*: ☐ Male ☐ Female	
Private Use: ☐ Yes ☐ No	Collective Agreement/SOCSO/Workmen Compensation Agreement: ☐ Yes ☐ No	

*Required fields

B. PARTICULARS OF PREMISES TO BE INSURED/PERIOD OF INSURANCE

Address:		
Postcode:	Year of Built:	No. of Storeys:

PMI/PR (09/18)

Business/Profession:

Name of Mortgagee/Chargee (if applicable):

Construction: Wall ☐ Bricks ☐ Glass ☐ Partly Bricks & Partly non-combustible | Roof ☐ Tiles ☐ Concrete ☐ Metal Sheet | Floor ☐ Reinforced Concrete ☐ Other. Please specify _____

Do you have the following Fire Fighting Appliances installed?

☐ Fire Extinguishers ☐ Hose reels ☐ Heat detectors
☐ Yard hydrants ☐ Sprinkler system ☐ Smoke detectors

Is the risk situated in a flood prone area or is there any history of flooding? Yes ☐ No ☐
If yes, please give details.

Anti-Crime Information (Please tick [✓])	
☐ Central Monitoring Station	☐ Alarm
☐ Closed Circuit Television (CCTV)	☐ Motion Sensors
☐ Watchman/Guard Services	☐ None of the above
☐ Others (please specify)	

Are there any other circumstances connected with the Premises which would increase the risk? Yes ☐ No ☐
If so, please give full particulars.

Period of Insurance: From dd/mm/yy To dd/mm/yy

C. SECTION 1 - FIRE

Please tick (✓) and complete:

Property to be insured	Sum Insured (RM)
☐ Building	
☐ Plant and Machinery	
☐ Business Furniture, Fixtures and Fittings	
☐ Removal of Debris	
☐ Others (please specify)	
Total Sum Insured	

Note: Please ensure Sum Insured on building/contents are adequately insured.

Special Perils & Rates (Please Select Extensions Required)

1.	Aircraft Damage	0.005% ☐
2.	Earthquake & Volcanic Eruption	0.010% ☐
3.	Storm & Tempest	0.015% ☐
4.	Flood*	0.086% ☐
5.	Explosion (Non-Industrial without boilers)	0.005% ☐
6.	Impact Damage:	
	- Excluding own vehicle	0.004% ☐
	- Including own vehicle	0.004% ☐
7.	Bursting or Overflowing of Water Tanks Apparatus or Pipes:	
	- Building exceeding 5 storeys (including mezzaine)	0.006% ☐
	- Others	0.005% ☐
8.	Bush/Lalang Fire	0.005% ☐
9.	Subsidence and Landslip*	0.081% ☐
10.	Riot, Strike & Malicious Damage	0.014% ☐
11.	Damage by Falling Trees or Branches and Objects therefrom	0.010% ☐

* Note: Subsidence and landslip and Flood perils can be only extended subject to no claims reported for the past 3 years

C. SECTION 2 - COMBINED ALL RISKS

Description of Benefits	Sum Insured/Limit of Liability (RM)		
	☐ Plan 1	☐ Plan 2	☐ Plan 3 (Flexi Cover)
Special All Risks On all fixed office machines and equipments	50,000	80,000	RM _____
Burglary On all property of every description belonging to the Insured or held by them in trust or on commission including business furniture and fittings, office plant, machinery and equipment	30,000	50,000	RM _____
Money On Money in Premises On Money in Transit Money in locked safe	10,000 10,000 10,000	20,000 20,000 20,000	RM _____ RM _____ RM _____
Plate Glass On all Fixed Glass	30,000	50,000	RM _____
Fidelity Guarantee On all employees of the Insured	30,000	50,000	RM _____
Public Liability Third party accidental bodily injury and/or accidental property damage	1,000,000	2,000,000	RM _____
Employers Liability On all employees (excluding Socso members and foreign workers) Any one event Any one period	 150,000 1,000,000	 200,000 1,000,000	 RM _____ RM _____
Group Personal Accident Accidental Death or Total Permanent Disablement on employees and/or committee members* (limit per person) * Limited to 12 employees and/or committee members	20,000	30,000	RM _____
Machinery breakdown On all plant, machinery, mechanical equipment and apparatus	Maximum Total Sum Insured: RM100,000* *Actual value of Total Sum Insured to be declared: RM _____	Maximum Total Sum Insured: RM200,000* *Actual value of Total Sum Insured to be declared: RM _____	Actual value of Total Sum Insured to be declared: RM _____

C. SECTION 3 - ERROR & OMISSION INSURANCE (To be sold strictly together with Fire Insurance)

Description of Benefits	Limit of Liability (RM)		
	☐ Plan 1	☐ Plan 2	☐ Plan 3 (Flexi Cover)
Third Party Liability (Any one occurrence/in Aggregate)	500,000	2,000,000	RM _____

D. TABLE OF PREMIUM

Section	Description	Annual Premium (RM)		
C. Section 1	Fire	As per Fire Tariff Rate (minimum premium RM79.50)		
		Plan 1 (RM)	Plan 2 (RM)	Plan 3 (RM)
C. Section 2	Combined All Risks	508.80	826.80	Premium rating to be computed based on sum insured provided by Insured.
C. Section 3	Error & Omission Insurance	530.00	1,908.00	Premium rating to be computed based on sum insured provided by Insured.

Note: Premium rates above are inclusive of 6% Service Tax.

E. GENERAL INFORMATION

1. Have you ever suffered any loss in respect of the above insurance coverage in the past? Yes ☐ No ☐
   If yes, please give full particulars.

2. Have you been previously/currently insured under any of the Section insured herein? Yes ☐ No ☐
   If so, with which Insurance Company and for what amount?

3. Has the insurance now proposed been declined, cancelled, refused renewal or subject to any special terms by any other Insurance Company?
   Yes ☐ No ☐
   If yes, please give details.

F. PAYMENT METHOD

I wish to pay my premium RM (inclusive of all tax) ("Total Amount Due")

By: ☐ Cash ☐ Cheque (Please cross the cheque and made payable to 'AXA Affin General Insurance Berhad')

Bank	Cheque No.	Amount (RM)

☐ Visa ☐ MasterCard Card No. ☐☐☐☐ - ☐☐☐☐ - ☐☐☐☐ - ☐☐☐☐ Expiry Date: ☐☐☐☐ (mm/yy)

Cardholder's Name:

Cardholder's Signature: Date: dd/mm/yy

G. DECLARATION BY PROPOSER

I/We hereby declare that the above answers and statements are true, and that I/we have withheld no information whatever regarding this application.

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.

Signature of Proposer: Date: dd/mm/yy

Acceptance Conditions

1. C Section 1 and 2 are compulsory.
2. Strictly for Apartment/Condominium/Flat only.
3. The premises are classified as construction 1A.
4. Risk with claims history/known losses in the past to be referred to the Company.

H. DECLARATION BY INTERMEDIARY/INSURER

I/We hereby confirm that I/we have sighted the original copy of the NRIC/Passport and verified the identity of the proposer.

Signature of Intermediary/Insurer Date: dd/mm/yy

Name: Account No:

Note: Please attach a copy of the Proposer's NRIC/Passport where the premium is more than RM50,000.