



Proposal Form

Property Management Insurance Package

Date:

IMPORTANT NOTES

- 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.
- The personal data ("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 purposes related to our insurance business or direct marketing. In connection with this, we may disclose your information (including your Personal Data) to any of the aforementioned companies. We may also disclose your information (including your Personal Data) to any other third parties (which include third party service providers, reinsurers, claim adjusters/investigators, related industry associations, regulators, statutory bodies, government authorities and any person who is under a duty of confidentiality and/or who has undertaken the responsibility to keep such data confidential). A complete list of our disclosures to third parties can be found in the Data Privacy Notice in our website.
 We will cease to use the Personal Data if you request Us to do so. For further details on how to exercise your rights, please refer to the "Data Privacy Notice" in Section I or our website at www.axa.com.my
- 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.
- No cover is in force until the proposal has been accepted in writing by the Company.
- 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.

- ALL QUESTIONS MUST BE FULLY ANSWERED - TICKS OR DASHES WILL NOT SUFFICE**
 (If more space is required, please write on separate sheet of paper and attach herewith)
- PLEASE WRITE IN BLOCK LETTERS AND IN BLACK INK**
- 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*:	
Tel. No. (H/P)*:	Tel. No. (Office):	Tel. No. (Home):	
Marital status*:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other	Gender*:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Private Use:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Collective Agreement/SOCSO/Workmen Compensation Agreement:	<input type="checkbox"/> Yes <input type="checkbox"/> No

*Required fields

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

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

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 [✓])

<input type="checkbox"/> Central Monitoring Station	<input type="checkbox"/> Alarm
<input type="checkbox"/> Closed Circuit Television (CCTV)	<input type="checkbox"/> Motion Sensors
<input type="checkbox"/> Watchman/Guard Services	<input type="checkbox"/> None of the above
<input type="checkbox"/> 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)
<input type="checkbox"/> Building	
<input type="checkbox"/> Plant and Machinery	
<input type="checkbox"/> Business Furniture, Fixtures and Fittings	
<input type="checkbox"/> Removal of Debris	
<input type="checkbox"/> 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%	<input type="checkbox"/>
2. Earthquake & Volcanic Eruption	0.010%	<input type="checkbox"/>
3. Storm & Tempest	0.015%	<input type="checkbox"/>
4. Flood*	0.086%	<input type="checkbox"/>
5. Explosion (Non-Industrial without boilers)	0.005%	<input type="checkbox"/>
6. Impact Damage:		
- Excluding own vehicle	0.004%	<input type="checkbox"/>
- Including own vehicle	0.004%	<input type="checkbox"/>
7. Bursting or Overflowing of Water Tanks Apparatus or Pipes:		
- Building exceeding 5 storeys (including mezzaine)	0.006%	<input type="checkbox"/>
- Others	0.005%	<input type="checkbox"/>
8. Bush/Lalang Fire	0.005%	<input type="checkbox"/>
9. Subsidence and Landslip*	0.081%	<input type="checkbox"/>
10. Riot, Strike & Malicious Damage	0.014%	<input type="checkbox"/>
11. Damage by Falling Trees or Branches and Objects therefrom	0.010%	<input type="checkbox"/>

* 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)		
		Plan 1 (RM)	Plan 2 (RM)	Plan 3 (RM)
C. Section 1	Fire	As per Fire Tariff Rate (minimum premium RM79.50)		
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? If yes, please give full particulars.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. Have you been previously/currently insured under any of the Section insured herein? If so, with which Insurance Company and for what amount?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Has the insurance now proposed been declined, cancelled, refused renewal or subject to any special terms by any other Insurance Company? Yes <input type="checkbox"/> No <input type="checkbox"/> 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)

Online Transfer (CIMB Bank Virtual Account) - -

Credit / Debit Card

Note: For online transfer, credit and debit card payment, please contact your AXA Servicing Representative.

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.

- I/We hereby consent to have AXA Affin General Insurance Berhad and/or any company within the AXA Group of Companies and/or any of its associated companies, within or outside Malaysia, process my/our Personal Data for the purposes and to the extent stated in the Data Privacy Notice.
- I/We would like to receive special offers, promotions, surveys and information related to the insurance products, events and services of AXA Affin General Insurance Berhad and/or any company within the AXA Group of Companies and/or any of its associated companies.

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.

I. PERSONAL DATA POLICY

Your privacy is important to us, AXA AFFIN General Insurance Berhad (“AXA AFFIN”), and we are committed to ensure that your personal data under our care is safe and secured. The following paragraphs will provide you with a better understanding of how we collect, process, use, retain, secure, endeavour to maintain accuracy and how you could access your personal data.

Collection of Personal Data

In order to process the purchase of an insurance policy and to perform policy services, it is necessary for you to provide us with obligatory personal data, such as your name, identification number, birth date, address, phone number, information on your health or medical condition, financial, familial and non-familial information etc. Your personal data is captured in the application form and other relevant forms as and when you transact or when you require changes or amendments to your personal details. Your personal data once provided by you would be input into our information system for processing, safe keeping and for the performance of our obligations in relation to your policy.

Processing and Use of Personal Data

We process your personal data for the following purposes:

1. for the performance of contracts between AXA AFFIN and you;
2. for the performance of our functions;
3. for the performance of our due diligence process to conduct background checks to validate and confirm the information provided by you;
4. for compliance with all applicable laws, rules, regulations, guidelines and/or other legal or regulatory requirements, as well as requirements of the government, law enforcement agencies, and any authorities to whom we are subject to, or any orders of the Court;
5. for litigating, defending or responding accordingly to an actual or potential lawsuit or queries involving regulatory and non-regulatory bodies;
6. for generally protecting our rights and property as well as ensuring the technical competence and functioning of our systems;
7. to monitor and detect any fraudulent activities in the insurance industry;
8. for marketing (including direct marketing) of insurance products;
9. to conduct market research, understand and analyse customer behaviour, location, preferences and demographics for us to offer you other products and services as well as carry out special offers and marketing programmes which may be relevant to your preferences and profile; and
10. any other purposes which are related to the aforesaid.

All personal data requested by us is obligatory unless stated otherwise. If you do not provide us with such information, we may not be able to provide you with insurance coverage or to respond to any claims.

Disclosure of Personal Data

We may disclose your personal data for the abovementioned purposes to the following parties (including those within and outside Malaysia):

1. our associated and related companies and affiliates (“AXA Group”);
2. any agents, service providers, contractors or third parties who provide any services to the companies within the AXA Group;
3. any person who has a duty of confidentiality to us; for example, external auditors, medical practitioners, trustees, insurance companies, and actuaries;
4. government agencies, statutory bodies, and other authorities;
5. our business partners and strategic alliances;
6. our assignees or potential assignees, acquirers or potential acquirers and successors-in-title; and
7. any other parties, in respect of whom you have consented to the disclosure of your personal data.

Access and Change Requests

We take all reasonable steps to ensure that the personal data provided by you or your authorised party is accurate, complete, not misleading and kept up-to-date consistent with the purpose for which the personal data was collected and further processed.

Please contact us or request to speak to our Privacy Officer at 03-2170 8282 if you would like to access to or amend or correct your personal data that is inaccurate, incomplete, misleading or not-up-to-date. You could also fax or email us by using the details stated below. We will use reasonable efforts to accommodate the access and make the changes as soon as practically possible. A fee may be charged for this purpose. We may request verification of your identity before allowing such access or making such changes and any other details to help us address your request or concerns appropriately.

New Product and Services

As part of our continuous efforts to promote awareness and greater understanding on our new products and services for your benefit, we will from time to time contact or send you information on the said new products or services.

Inquiries and complaints

If you need to contact us or if you have any inquiries or complaints (such as limiting the processing of certain information, including the withdrawal of consent), please write to us at:

AXA AFFIN GENERAL INSURANCE BERHAD

Customer Service Department Ground Floor,
Wisma Boustead,
71 Jalan Raja Chulan,
50200 Kuala Lumpur

Tel : 603-2170 8282 or Fax : 603-2031 7282 or Email : customer.servicedpp@axa.com.my

Your complaint will be managed and resolved through our internal complaint procedure.

If there are any inconsistencies between the English and Bahasa Malaysia version of this Personal Data Policy, the English version shall prevail.