

# QBE Cyber and Data Security (Auto-bind) Proposal Form



QBE Insurance (Malaysia) Berhad Registration No: 198701002415

(Part of QBE Insurance Group)  
(Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia)  
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## IMPORTANT NOTICES

- 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.

QBE Agency No.:  QBE Agency Name:

## PERIOD OF INSURANCE

From  To  (dd/mm/yyyy)

## A. PARTICULAR OF PROPOSER

Salutation:  Mr  Ms  Miss  Others (please specify)

Name of Proposer

Correspondence Address

Postcode  City

State  Country

Contact Number  Email

Occupation (if more than one please state all)

### 1. Personal Details (For Consumer Contract)

Gender  Male  Female Marital Status  Married  Single  Divorced/ Widowed

Identification Number   New NRIC  Passport  Military IC  Others

Handphone Number  Nationality

Date of Birth  (dd/mm/yyyy) Tax Identification No.

### 2. Business Details (For Non-Consumer Contract)

Tax Identification No.  Business Registration No.

SST Registration No.  Tel No. (Office)

Trade or profession or nature of business

How long has the business been established?

Clear 1

**B. APPLICANTS DETAILS (the applicant including all subsidiaries)**

Legal entity name of applicant	<input type="text"/>	Registration No.	<input type="text"/>
Business occupation/industry	<input type="text"/>	Website	<input type="text" value="www."/>
Principal address	<input type="text"/>	Postal Code	<input type="text"/>
Email	<input type="text"/>	Contact No.	<input type="text"/>

Are these statements correct? (if any answer is "NO" please contact your agent/broker who will refer to QBE for underwriting and pricing)

- |  |                          |     |                          |    |
|--|--------------------------|-----|--------------------------|----|
| (a) Your annual revenue (including fee income, net profit/loss (before tax), gross wage roll) does not exceed RM30m  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (b) Your revenue is not derived from outside Malaysia  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (c) You have up-to-date anti-malware, firewall protection and automatic virus-scan on all your computer systems  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (d) Your business activities do not include any of the below occupations/industries:   |                          |     |                          |    |
| (i) Health care/hospital/medical   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (ii) Social media/social networking/100% e-commerce business/adult entertainment/gambling  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (iii) Internet Service Provider/Telco/hosting/data center/data aggregator/data processor/cyber security  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (iv) Utility/energy/oil & gas/mining   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (v) Government/education   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (vi) Financial institution related services such as mortgage, investment, merchant bank, government and development bank, savings or loan institution, mortgage lender, building society, credit union, insurance company, insurance broking, financial advisory | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (vii) Decentralised finance/peer-to-peer lending/cryptocurrency/Non-fungible tokens (NFTs)/ digital currency/digital assets  | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (e) You have obtained Personal Data Protection license issued by Personal Data Protection Commission. Please provide the date of certification   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (f) Is remote access, and all administrative access, to applicant data and systems protected by multi-factor authentication?   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

**MAIN POLICY COVER (excluding applicable taxes and Stamp Duty)**

LIMIT OF INDEMNITY (Any one claim and in the aggregate)	DEDUCTIBLE (each & every claim)	REVENUE current financial year (forecast) RM				
		Up to 6,000,000	6,000,001 to 10,000,000	10,000,001 to 15,000,000	15,000,001 to 20,000,000	20,000,001 to 30,000,000
RM300,000	RM15,000	RM1,600 <input type="checkbox"/>	RM1,850 <input type="checkbox"/>	RM2,250 <input type="checkbox"/>	RM2,600 <input type="checkbox"/>	RM3,100 <input type="checkbox"/>
RM750,000	RM15,000	RM2,250 <input type="checkbox"/>	RM2,500 <input type="checkbox"/>	RM3,200 <input type="checkbox"/>	RM4,100 <input type="checkbox"/>	RM5,550 <input type="checkbox"/>
RM1,500,000	RM15,000	RM2,850 <input type="checkbox"/>	RM3,200 <input type="checkbox"/>	RM4,100 <input type="checkbox"/>	RM4,700 <input type="checkbox"/>	RM6,800 <input type="checkbox"/>
RM3,000,000	RM15,000	RM3,450 <input type="checkbox"/>	RM4,000 <input type="checkbox"/>	RM4,950 <input type="checkbox"/>	RM5,950 <input type="checkbox"/>	RM7,750 <input type="checkbox"/>

**WITH OPTIONAL EXTENSIONS TO MAIN POLICY COVER (excluding applicable taxes and Stamp Duty)**

Cyber Business Interruption and Cyber Extortion extension						
RM300,000	RM15,000	RM2,100 <input type="checkbox"/>	RM2,500 <input type="checkbox"/>	RM3,100 <input type="checkbox"/>	RM3,450 <input type="checkbox"/>	RM4,200 <input type="checkbox"/>
RM750,000	RM15,000	RM3,000 <input type="checkbox"/>	RM3,350 <input type="checkbox"/>	RM4,350 <input type="checkbox"/>	RM5,450 <input type="checkbox"/>	RM7,400 <input type="checkbox"/>
RM1,500,000	RM15,000	RM3,850 <input type="checkbox"/>	RM4,350 <input type="checkbox"/>	RM5,450 <input type="checkbox"/>	RM6,300 <input type="checkbox"/>	RM9,150 <input type="checkbox"/>
RM3,000,000	RM15,000	RM4,650 <input type="checkbox"/>	RM5,300 <input type="checkbox"/>	RM6,650 <input type="checkbox"/>	RM7,900 <input type="checkbox"/>	RM10,350 <input type="checkbox"/>

## C. CLAIMS AND DECLARATION

Are these statements correct? (if any answer is "NO" please contact your agent/broker who will refer to QBE for underwriting and pricing)

- (a) You have never experienced any system outage affecting your business  Yes  No
- (b) You have never experienced any cyber, data breach, or ransomware incident, or any other claim that could be the subject to a claim under the policy  Yes  No

I the undersigned, after enquiry declare as follows:

- (a) I am authorised by each of the other entities to be insured to complete this proposal form.  Yes  No
- (b) I have read and understood the notice to the proposed insured at the back of the proposal form.  Yes  No
- (c) I have read this proposal form and the accompanying documents and acknowledge the contents of same to be true and complete.  Yes  No
- (d) I understand that, up until a contract of insurance is entered into, I am under a continuing obligation to immediately inform QBE of any change in the particulars or statements contained in this proposal form or in the accompanying documents.  Yes  No

Name of Managing Director /  
Chief Executive Officer

Date:

(dd/mm/yyyy)

Signature

## D. MAIN POLICY COVERAGE (Please refer to the insurance policy wording for full coverage details)

<p><b>INSURED SECTION 1:</b> <b>Cyber, data security and multimedia cover (third party claims)</b></p> <ul style="list-style-type: none"> <li>Liability arising out of multimedia exposures as a result of a hacker. For example defamation, libel and infringement of intellectual property rights.</li> <li>Liability arising from the failure to properly handle, manage, store, destroy or otherwise control personally identifiable information.</li> <li>Liability arising out of unintentional transmission of a computer virus.</li> <li>Liability arising out of a hacker's fraudulent use of information.</li> <li>The costs of any financial benefit that has been transferred to a third party that cannot be recouped and has occurred as a result of a covered loss.</li> <li>The costs to replace or restore documents discovered by the insured to be lost, damaged or destroyed.</li> </ul>	<p><b>INSURED SECTION 4:</b> <b>Regulatory defence and penalty costs cover (first party claims)</b></p> <ul style="list-style-type: none"> <li>Payment for those amounts which the insured is legally obliged to pay (including legal and defence costs) as a result of a civil regulatory action, regulatory compensatory award, civil penalty, or fines to the extent insurable by law, imposed by a government or public authority regulator.</li> </ul>
<p><b>INSURED SECTION 2:</b> <b>Data breach notification cover (first party claims)</b></p> <ul style="list-style-type: none"> <li>The provision of consumer notifications to comply with data breach law following a data breach.</li> <li>The legal fees incurred to identify notification communication obligations and draft notification communications.</li> <li>The costs to send and administer notification communications.</li> <li>The costs of call center services to respond to enquiries and queries following a notification communication.</li> </ul>	<p><b>INSURED SECTION 5:</b> <b>Public relations costs cover (first party claims)</b></p> <ul style="list-style-type: none"> <li>Payment for all reasonable costs the insured incurs for a public relations and crisis management consultant to avert or mitigate any material damage to any of the insured's brands and business operations.</li> </ul> <p><b>INSURED SECTION 6:</b> <b>IT forensics costs cover (first party claims)</b></p> <ul style="list-style-type: none"> <li>Payment for a forensic consultant to establish the identity or methods of the hacker or other details required by the insurer following a data breach.</li> <li>Payment for a security specialist to assess the insured's electronic security and the costs of reasonable security improvement.</li> <li>Payment for the temporary storage of the insured's electronic data at a third-party host location, if it is viewed that the insureds' information and communication assets remain vulnerable to damage, destruction, alteration, corruption, copying, stealing or misuse by a hacker.</li> </ul>
<p><b>INSURED SECTION 3:</b> <b>Information and comm. asset rectification (first party claims)</b></p> <ul style="list-style-type: none"> <li>The costs to repair, restore or replace the affected parts of the insured's information and communication assets after they were damaged, destroyed, altered, corrupted, copied, stolen or misused by a hacker.</li> </ul>	<p><b>INSURED SECTION 7:</b> <b>Credit monitoring costs (first party claims)</b></p> <ul style="list-style-type: none"> <li>Payment for credit monitoring services in order to comply with data breach law.</li> </ul>

**E. OPTIONAL EXTENSIONS TO MAIN POLICY COVER (Please refer to the insurance policy wording for full coverage details)**

<b>INSURED SECTION 8: (OPTIONAL EXTENSION) Cyber Business Interruption and Section (first party claims)</b> <ul style="list-style-type: none"><li>• Payment for loss of business income, as a result of the total or partial interruption, degradation in service, or failure of information and communication assets following a failure by the insured or a service provider to protect against unauthorised access to, unauthorised use of, a denial of service attack against, or transmission of a computer virus to, information and communication assets.</li></ul>	<b>INSURED SECTION 9: (OPTIONAL EXTENSION) Cyber extortion cover (first party claims)</b> <ul style="list-style-type: none"><li>• Payment for reasonable and necessary expenses incurred by the insured including the value of any ransom paid by the insured for the purpose of terminating a cyber extortion threat.</li></ul>
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**F. DECLARATION AND SIGNATURE**

(i) Privacy Statement -

I understand that the personal data provided to purchase the above insurance will be used by QBE Insurance (Malaysia) Berhad to facilitate the performance of the function as an insurance company. I allow QBE Insurance (Malaysia) Berhad to collect, use and disclose my personal data to selected third parties in or outside Malaysia, in accordance with Privacy Policy Statement which is posted at our website [www.qbe.com/my](http://www.qbe.com/my).

Yes  No

(ii) I/We do hereby declare that

1. 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.
2. I/we will accept the terms, exclusions and conditions which will be set out in the policy to be issued.
3. The liability of the Company does not commence until the application has been accepted.

Yes  No

(iii) I/We further agree that QBE Insurance (Malaysia) Berhad and/or it's holding company can share and use my/our data and personal information for the purpose of promoting the Company's and/or it's holding company's products, new services and support requirement; and marketing campaigns and activities and commercial transitions.

Yes  No

Signature of Applicant  Date  (dd/mm/yyyy)

Name Of Applicant

Name of Intermediary

Business Address & Telephone no.

**G. DECLARATION BY AGENT / BROKER / OFFICER (STAFF OF INSURANCE COMPANY)**

- 1) In compliance with the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001, I hereby certify that the Applicant's original NRIC/Passport/Business Registration Certificate was verified and authenticated by me at the point of sales.
- 2) I/We have recommended this product being purchased by the proposer, based on the information disclosed and other relevant information which are made available to me/us. I/We have taken reasonable steps to ensure the advice is suitable to the customer for the purpose of insurance coverage.

Name

NRIC No.

Signature & Company Stamp

Date  (dd/mm/yyyy)

Clear 4