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QBE Insurance (Malaysia) Berhad Reg. No.: 161086-D

(Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia) No. 638, Level 6, Block B1, Leisure Commerce Square, No. 9, Jalan PJS 8/9, 46150 Petaling Jaya, Postal Address P.O. Box 10637, 50720 Kuala Lumpur, Malaysia. telephone +603 7861 8400 • facsimile +603 7873 7430 GST Reg No.: 002077360128 www.qbe.com.my e-mail : info.mal@qbe.com

IMPORTANT NOTICE

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 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 has been entered into, varied or renewed with us any of the information given in this Proposal Form is inaccurate or has changed.

Cover Note No.						Intermediary No					
Company name											
Are you Registered for GST? If Yes, Please provide the following Yes No											
GST Registration Da	ate		/	1	GS	ST Registration Numbe	r				
Company address											
								Tel			

A.	PA	RTICULARS OF PROPOSA	AL								
1.	(a)	Name of Proposer and Subs	idiary and/	or Affiliated	Companies (ir	n full)					
	(b)	State address of the premise	es to which	the Policy is	to apply.						
	(c)	State the floor on which you	ır premises	s are situated	I						
	(d)	How long have you carried o	on busines	s?	In these Pre	mises:					
					Elsewhere:						
2.	NAT	URE of your BUSINESS	Retail:	%	Wholesale:		% Manu	facturing:	%	Pawnbroking:	%
3.		LOYEES									
	(a)	How many employees have	you?								
	(b)	What is the minimum number of your premises at any time									

B. VALUATION BASIS

On what basis do you require claims to be settled?

N.B. Unless otherwise agreed on the Policy claims in respect of your own stock will be settled on the basis of COST price. All figures completed in this Proposal must reflect the basis of valuation required.

C.	STOCK VALUES		
(i)	What was the AVERAGE total value during the last twelve months of		
	(a) Your own stock and bank notes? (the stock figure is to be declared on the basis of cost price or on t	he basis as in question B above)	RM
	(b) Goods in trust (other than for safe custody) goods on approval, re		RM
		TOTAL	RM
	The total under (a) and (b) comprises approximately		
	Jewellery, gold and platinum goods, buiiion, precious stones and	pearls	RM
	Watches		RM
	Clocks, silverware, platewate, and other similar goods		RM
(ii)	What was the MAXIMUM value of your own stock and goods in trust (or and bank notes at any time during the last twelve months?	her than for safe custody)	RM

D. VALUES OUT OF SAFE

What will be the MAXIMUM VALUE of all watches, jewellery, gold, bullion and platinum goods, precious stones and pearls (including those in windows) OUT OF LOCKED SAFE OR STRONGROOM?

Outside business hours

RM

During temporary closing e.g. Lunch Time (If applicable) RM

E. WINDOW DISPLAY

Α.		/ many Windows			
	(b)	Outside showcases have you			
B.	Give	MAXIMUM values which will not	be exceeded of	During Business hours	Outside Business hours
	(i)	Any one			
		(a) Window		RM	RM
		(b) Outside showcase		RM	RM
	(ii)	Any one article		RM	RM
	(iii)	Any one pad or tray of article		RM	RM
	(iv)	In all windows and showcases		RM	RM

F. OUTDOOR RISK

I. Give the following information in respect of all insured property (inclusive of amounts carried to and from Bank or Safe Deposit) carried outside the Proposer's Premises stated in Question 1 (b) by yourselves, your representatives, travellers, agents, messengers and delivery hands but NOT Brokers during the last 12 months.

(a)	In the City or Town in which the Proposer's premises are situated:	No. of days each person per annum	Average amount each	Maximum amount each
	(i) Name of all principals, representatives, travellers and agents		RM	RM
	(ii) Number of messengers and delivery hands:		RM	RM
(b)	Elsewhere (state Countries in each case):			
	Names of all principals, representatives, travellers and agents		RM	RM

F . (OUTDOOR RISK (Continuation)
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II. HOME RISK

Does any Principal, Employee, Traveller or Agent take Stock to his private residence for any purpose? If so, please give following information:						
Name	Address	Maximum value taken	Full details of Safe or any other protection	Is the property ever left unattended at the Private Dwelling House		
		RM				
		RM				
		RM				
		RM				
		RM				

III. ENTRUSTMENTS

What was the estimated value entrusted to dealers, customers, repairers, cutters and brokers during the past 12 months?

(a) Average:	RM	(b) Maximum:	RM	at any one time

IV. SENDINGS

What was the AGGREGATE TOTAL value of all insured property sent during the past 12 months

(b) elsewhere (state countries and values sent to each)?

N.B. The Policy contains a condition that postal sendings containing jewellery, precious stones, precious metals and/or watches exceeding RM300.00 any one package are sent by registered post/airmail.

By

Registered

Post

By

Registered

Air Mail

By Other Air

Conveyances

By Ordinary Post,

Rail. Steamer and

Other Conveyances

RM

RM

V. EXHIBITIONS AND DISPLAYS

(a) Did you during the past 12 months exhibit any portion of your stock at any Exhibition, other than one promoted or financially assisted by any Public Authority or by any Trade Association, or entrust goods for any display or performance? If so, give full particulars including values

(b) Do you exhibit goods, in any showcase in any hotel, club or elsewhere away from your premises? If so, give full particulars including values and details of protections (*i.e. type of glass locks and the like*)

VI. OUTSIDE LIMIT (which also includes sendings)

What limit is required for any one loss for property elsewhere than at the Proposer's premises stated in Question 1 (b)?

(This limit will NOT apply to property in any safe deposit vault or bank vault).

G. GENERAL PROTECTIONS OF THE PREMISES

Are the premises occupied at nigh	t
(a) by Proposer?	
(b) by employee or caretaker?	
	cellar or basement from outside the shop? <i>tions</i> .
Give details of the following and h	ow they are protected:
(a) each outer door,	
(b) each inner door,	
(c) all windows other than Displa	y Windows,
(d) all skylights or fanlights or ro	of openings.
	 (b) by employee or caretaker? Are there any openings leading to <i>If so, please give details and protect</i> Give details of the following and h (a) each outer door, (b) each inner door, (c) all windows other than Displated

G. GENERAL PROTECTIONS OF THE PREMISES (Continuation
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- (4) DISPLAY WINDOW AND SHOWCASE PROTECTIONS

 (a) Give full details of the type of glass in all your display windows and/or outside showcases.
 - (b) (i) Are all the section of the windows containing jewellery, gold, silver, platinum, pearls and precious stone and watches substantially off from the remainder of the display?
 - (ii) What precautions do you take to protect the rear of your display windows?
 - (iii) Are they kept permanently locked and keys removed?
 - (iv) Are inside windows similarly locked and keys removed?
 - (v) Are inside showcases similarly locked and keys removed?
 - (c) AT NIGHT and at all other times when premises are not open for business.
 - (i) Are all display windows and/or outside showcases protected externally by either shutters or by a grille?(ii) Give full particulars of such protections and state how
 - they are secured.
 - (iii) Does this protection cover the entire front of your premises?
 - (iv) If not, give details
 - (d) DURING BUSINESS HOURS

Are all your display windows and/or outside showcases containing jewellery, gold, silver, platinum, pearls and precious stones and watches protected internally either by:

(i) Fixed grilles covering the whole of the display?

Give specifications of these grilles Or

- (ii) Hanging glass suspended between the window glass and the display? Give details and type of glass
- (iii) Can the internal grilles or the suspended glass be reached under or over or around?

(5) BURGLAR ALARMS

- (a) Is there a Burglar Alarm?
- (b) If so, state name and forward copy of maker's specification to Underwriter (or if not available give full details)
- (c) Are holdup/panic buttons incorporated in the system?
- (d) Is the system maintained under contract?
- (6) SAFES
 - (a) Give the maker's name of safe, cost when purchased (state whether new or second-hand), and give details of any descriptive markings on the door.
 - (b) Approximate size and weight
 - (c) Approximate age.
 - (d) Whether illuminated and visible from the street at night.
- (7) STRONG ROOMS
 - (a) Is there a Strong Room
 - (b) If so, give full details
- (8) Are all the keys (including your Alarm, Safe and Strong Room keys) removed from the premises outside business hours?
- (9) Are there any other special means of protection? If so, give details.
- (10) STOCK RECORDS
 - (a) When was your last annual stock taking?
 - (b) Do you keep proper records of all sales purchases and transactions?



Size:

Weight:

H.	OT	HER INFORMATIONS					
(1)	LOSS	LOSSES					
	(a)	Have you ever sustained a loss or losses?					
	(b)	If so, give statement covering the past five years with particulars, including the amount of each loss, and, if insured, whether paid in full or otherwise.					
(2)		EIPTS Is it your practice to give receipts for goods left with you by non-trade customers, for repair, valuation, sale, or any other purpose and to require surrender of such receipts before goods are returned to the customer?					
	(b)	Do you use entrustment/approbation notes in respect of all entrustments?					
(3)	CON	CONTENTS FIRE RATE					
	(a)	What is the Fire insurance rate on the contents of your premises?					
	(b)	By whom was this quoted?					
(4)	SUM	INSURED					
	For what amount is Policy required?						
	(a)	On Stock (including goods in trust and bank notes)	RM				
	(b)	On Trade and Office Furniture, Fixtures and Fittings, Machinery, Plant, Safes, Alarm Systems, Tenants' decorations and improvements, and all other Contents (except your stock and goods in trust) at your premises against the	RM				
		risks of Fire, lightning, Explosion, Aircraft, Burglary or Theft or any attempt thereat, Storm, Tempest, Flood or Bursting or Overflowing or Leakage of Water Pipes or Apparatus, or Impact by any road vehicle, horse or cattle not belonging to or under your control.					
		TOTAL	RM				
(5)		ERENCES					
	Unie	ss proposing for renewal, give the name and address of two references FROM YOUR TRADE.					
(6)	отн	ER INSURANCE					
(0)		Have any Insurer ever cancelled or refused to issue or to continue any Insurance for you?					
	(b)	Have you previously been insured? If so, state with whom, risks covered, and for what amount.					
	(0)	have you previously been insureu: It so, state with whom, fisks covered, and for what amount.					
(7)	Aret	here any other circumstances within your knowledge or opinion not already disclosed, affecting or likely to affect th	e proposed insurance?				

Privacy Policy Statement

I/We understand, acknowledge, agree and consent that QBE Insurance (Malaysia) Berhad and all of its related companies ("QBE") is permitted to collect, use, disclose and/or process my personal data revealed hereto. QBE is at liberty to disclose and transfer (including outside Malaysia) such personal data to relevant third parties provided that the revelation of my personal data is strictly for the purpose(s) in relation to the insurance which I have applied hereto, including but not limited to, the purpose(s) of: (i)processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims; (ii) exercising any rights that QBE may have to recover monies from third parties; (iii) making reinsurance recoveries; (iv) investigating the accident and/or my claims; (v) carrying out and/or dealing with my instructions or responding to any enquiries by me; (vi) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); (vii) the development of databases on claims, claims statistics and/or claims development; and/or (viii) complying with applicable law in administering, processing, handling and/or dealing with my claims; (collectively the "Purpose"). My consent given hereto covers any repeated collection of my personal data in the same circumstances and is in line with the requirement set forth on the Personal data in the same circumstances and is in line with the requirement set forth on the Personal Data Protection Act 2010.

QBE Insurance (Malaysia) Berhad is committed to ensuring the safety and security of your personal data. You may refer to our Privacy Policy Statement which is posted at our website <u>www.qbe.com.my</u>. If you seek further enquiries, please contact the Personal Data Privacy Officer at telephone number 03-78618400.

I/We do hereby declare that:

- 1. I am/we are authorised to make this proposal.
- 2. The answers stated in this proposal are true and complete and I have not withheld any information which may influence the acceptance of this application.
- 3. This application and declaration hereby given shall be the basis of the contract with the Company and I/we will accept the terms, exclusions and conditions which will be set out in the policy to be issued.
- 4. The liability of the Company does not commence until the application has been accepted.

Proposer's Signature:	Date: (dd/mm/yy)	/	/	
]				
and company stamp				

J. DECLARATION BY AGENT / BROKER / OFFICER (STAFF OF QBE)

In compliance with Section 16(2) of the ANTI-MONEY LAUNDERING AND ANTI-TERRORISM FINANCING (AMENDMENT) ACT 2014

- 1. I/ WE hereby certify that I have verified and authenticated the Proposer's NRIC / Business Registration Certificate at the point of sales.
- 2. I/WE have maintained a copy of the NRIC of the applicants of individual insurance where premium is more than RM50,000.00, a copy of Certificate of Incorporation (ROC or ROS) for applicants of group insurance policies where premium is more than RM100,000.00.

Name	NRIC No					
Signature & Company Stamp:		Date: (dd/	mm/yy)		/	/