



TOKIO MARINE
INSURANCE GROUP

Proposal Form/Borang Cadangan

Consequential Loss Insurance

Agent's Code _____ Cover Note No. _____ Policy No. _____
Kod Ejen _____ No. Nota Perlindungan _____ No. Polisi _____

Information collected in this proposal form shall be used in connection with the Company's purposes and course of business only.
Maklumat yang diperolehi di dalam borang cadangan hanya boleh digunakan dengan tujuan dan untuk urusan perniagaan Syarikat sahaja.

Please write in block letters and tick (✓) in the appropriate boxes. Kindly attach separate sheet if space is insufficient.
Sila tulis dalam huruf besar dan tandakan (✓) pada petak yang sesuai. Sila lampirkan kertas berasingan sekiranya kekurangan ruang.

Particulars of Proposer / Butir-butir Pencadang

Name of Proposer _____ Race _____
Nama Pencadang _____ Bangsa _____

Address _____
Alamat _____

Postcode _____
Poskod _____

Situation of ALL PREMISES to _____
which the Insurance is to apply _____

Nature of Business _____
carried on therein _____

Bank Name & A/C No. (for e-payment purpose) _____
Nama Bank & No. Akaun (untuk tujuan e-pembayaran) _____

Period of insurance (both dates inclusive) / Tempoh insurans (termasuk kedua-dua tarikh)

From _____ To _____
Dari _____ Hingga _____
D D M M Y Y Y Y D D M M Y Y Y Y

Items to be Insured

		Sum Insured	Indemnity Period
1.	On Gross Profit	RM	
2.	On Total Wages for the first _____ weeks followed by _____ % for the remainder of the Indemnity Period.	RM	_____ months i.e. the period between the fine and the restoration of normal conditions.
3.	On Accountants Fees	RM	
4.	Others (please specify): _____	RM	
Specified Working Expenses - Please indicate i.e. Purchases, freight and etc.			

Note: • Additional Perils - The perils required must be the same as those perils stated in the Fire Material Damage Policy.
• The above is on Difference Basis. For calculation other than this basis, please inform the Company.

Questions

1.	How long has Business been in existence?	
2.	Are your Books audited regularly?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Date of last audit	
	Name and Address of Auditors	
3.	Do you have any Insurance covering Consequential Loss currently? If so, give details	<input type="checkbox"/> Yes <input type="checkbox"/> No

Tokio Marine Insurans (Malaysia) Berhad

198601000381 (149520-U)

Level 20, Menara Hap Seng 3, Plaza Hap Seng, No. 1, Jalan P. Ramlee, 50250 Kuala Lumpur, Malaysia.
T: (03) 2027 8200 / 2789 8800 F: (03) 2022 2295 Customer Service Hotline: 1800 88 0812
tokiomarine.com

A member of the
Tokio Marine Group

4.	Has any Insurer declined your proposal or cancelled your insurance for:-	
	Fire Insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Loss of Profit Insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Have you suffered any loss by Fire? If so, please give details:-	<input type="checkbox"/> Yes <input type="checkbox"/> No
	How often?	
	Amount Paid in settlement of Claims	
	Date of Fire	
	Companies interested	
6.	Do you own your Business Premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If not, when does the Lease expire?	
	Does the Lease provide that premises must be reinstated in event of Fire?	
7.	Is there any Bill or Sale on your Stock? If so, state the amount	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Total Sum Insured for Fire Material Damage Insurance	
	Annual Premium Paid for Fire Material Damage Insurance	
9.	Are you insured against material damage caused by Boiler Explosion? If so in which Company?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If not insured, are the Boilers inspected regularly?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	By Whom?	
	How often?	

Any question not answered in this Proposal will be taken in the NEGATIVE.

- Liability is not attached until the proposal has been accepted by the Company.
- Any changes in the information given must be reported to the Company immediately or else the Company will reserve the right to decline all liability.
- Please give a definite answer to each question, dashes are not sufficient. Any question not answered in this Proposal will be taken as replied to in the negative.

4. Premium Warranty

It is a fundamental and absolute special condition of this contract of insurance that the premium due must be paid and received by the insurer within sixty (60) days from the inception date of this Policy/Endorsement/Renewal Certificate.

If this condition is not complied with then this contract is automatically cancelled and the insurer shall be entitled to the pro rata premium for the period they have been on risk.

Where the premium payable pursuant to this warranty is received by an authorised agent of the insurer, the payment shall be deemed to be received by the insurer for the purposes of this warranty and the bonus of proving that the premium payable was received by a person, including an insurance agent, who was not authorised to receive such premium shall lie on the insurer.

Subject otherwise to the terms and conditions of this Policy.

Payment Instruction / Arahan Pembayaran

- I enclose a cheque/bank draft/money order
Saya sertakan cek/bank draf/kiriman wang pos (No.)

If paying by credit card / Jika membayar dengan kad kredit

- Paying by credit card MasterCard Visa
Bayar dengan kad kredit

Name of Cardholder
Nama Pemegang Kad _____

Card Number Expiry Date
Nombor Kad *Tarikh Luput*

_____ _____

M M Y Y

Amount payable to
Jumlah: RM *bayar kepada TOKIO MARINE INSURANS (MALAYSIA) BERHAD*

(Subject to 8% Service Tax and RM10 Stamp Duty/*Tertakluk kepada Cukai Perkhidmatan 8% dan Duti Setem RM10*)

Signature of Cardholder
Tandatangan Pemegang Kad

Date / *Tarikh* _____

D D M M Y Y Y Y

Important Notices / Notis Penting

- 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. / Menurut Perenggan 4(1) Jadual 9 Akta Perkhidmatan Kewangan 2013, jika anda memohon insurans ini untuk tujuan yang berkaitan dengan perdagangan, perniagaan atau profesion anda, anda berkewajipan untuk mendedahkan apa-apa perkara yang anda tahu akan mempengaruhi keputusan kami dalam menerima risiko dan menentukan kadar dan terma yang dikenakan, dan apa-apa perkara yang munasabah yang boleh dijangka, jika tidak ia boleh menyebabkan pembatalan kontrak insurans, keengganan atau pengurangan ganti rugi, perubahan terma atau penamatan kontrak insurans anda.
- The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us. / Kewajipan pendedahan di atas hendaklah diteruskan sehingga kontrak insurans anda dimeterai, diubah atau diperbaharui dengan kami
- 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. / Anda juga mempunyai kewajipan untuk memberitahu kami dengan serta-merta jika pada bila-bila masa selepas kontrak insurans anda ditandatangani, diubah atau diperbaharui dengan kami, apa-apa maklumat yang dinyatakan dalam Borang Cadangan ini tidak tepat atau telah berubah.

Acknowledgement & Declaration / Perakuan & Pengisytiharan

Personal Data Protection Act 2010 (PDPA) Notice/Notis Akta Perlindungan Data Peribadi 2010

I/We acknowledge and consent that the personal data, including any sensitive personal data, collected herein be used, processed and disclosed for the purpose of this proposal to reinsurers; individuals or organizations associated with Tokio Marine Group, or any selected third party (within or outside Malaysia). I/We acknowledge that I/we am/are obligated to provide the above personal data failing which my/our proposal could not be processed and that I/we am/are entitled to obtain access to, request for correction of or limit the processing of my/our personal data; and
Saya/Kami mengakui dan bersetuju bahawa data peribadi, termasuk apa-apa data peribadi yang sensitif, yang dikumpulkan di sini digunakan, diproses dan dizahirkan untuk tujuan cadangan ini kepada penanggung insurans semula; individu atau organisasi yang berkaitan dengan Kumpulan Tokio Marine, atau sebarang pihak ketiga (di dalam atau di luar Malaysia). Saya/Kami mengakui bahawa saya/kami perlu memberikan data peribadi di atas, dan jika gagal berbuat demikian, cadangan saya/kami tidak dapat diproses dan saya/kami berhak untuk mendapatkan akses kepada, meminta pembetulan atau mengehadkan pemprosesan data peribadi saya/kami; dan

- I/We further agree that you may disclose and share my/our information with individuals or organizations associated with Tokio Marine Group, strategic partners and other third parties (within or outside Malaysia) as the Company deems fit for the purpose of cross-selling, promoting and marketing financial products and services offered by you and the other entities.
Saya/Kami juga bersetuju bahawa anda boleh mendedahkan dan berkongsi maklumat saya/kami dengan individu atau organisasi yang berkaitan dengan Kumpulan Tokio Marine, rakan strategik dan pihak ketiga lain (di dalam atau di luar Malaysia) yang difikirkan patut untuk tujuan jualan silang, promosi dan pemasaran produk dan perkhidmatan kewangan yang ditawarkan anda dan entiti-entiti lain.

Protection of your privacy is very important to us. Please visit our website at "www.tokiomarine.com" to view our Privacy Statement.
Perlindungan privasi anda adalah sangat penting bagi kami. Sila layari laman web kami di "www.tokiomarine.com" untuk melihat Penyata Privasi kami.

Declaration/Pengisytiharan

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.
Saya/Kami faham bahawa menjadi tanggungjawab saya/kami untuk mengambil langkah yang munasabah untuk tidak salah nyata semasa menjawab soalan-soalan dalam Borang Cadangan ini dan saya/kami dengan ini mengaku bahawa saya/kami telah menjawab dengan sepenuhnya dan dengan tepat soalan di atas.

I/We hereby apply for an Insurance (subject to the usual terms and conditions of the Insurer's Consequential Fire Loss Policy and special clauses attached thereto or endorsed thereon) against Loss of Gross Profit and other interest as set out above resulting from Fire, Lightning, Boiler and/or Economiser Explosion and other Contingencies as specified but limited to a period of _____ calendar months following each insured Contingency that may occur in the premises as described above and it is agreed that this proposal is the basis of the contract between the Company and myself/ourselves. "Turnover" to mean money paid or payable to the Insured for Goods sold and delivered and for services rendered in course of the business at the premises.

Signature of Proposer
Tandatangan Pemohon Insurans

Date / Tarikh

D	D	M	M	Y	Y	Y	Y

Verification of Applicant's Identification / Pengesahan Identiti Pemohon

To be completed by Insurance Agents, Insurance Brokers or Staff of TMIM.
Untuk dilengkapkan oleh Ejen Insurans, Broker Insurans atau Kakitangan TMIM.

- 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.
Selaras dengan Akta Pencegahan Pengubahan Wang Haram, Pencegahan Pembiayaan Keganasan dan Hasil daripada Aktiviti Haram 2001, saya dengan ini mengesahkan bahawa Kad Pengenalan/Pasport/Sijil Pendaftaran Perniagaan* asal Pemohon telah disemak dan disahkan oleh saya semasa urusan di jalankan.
- Photocopy of the Applicant's original NRIC/Passport/Business Registration Certificate* is attached to this proposal form, which premium exceeds RM50,000 per transaction for single policy or exceeds RM100,000 per transaction for group policy.
Salinan Kad Pengenalan/Pasport/Sijil Pendaftaran Perniagaan* asal Pemohon disertakan bersama borang cadangan ini, di mana premium polisi tunggal melebihi RM50,000 setiap transaksi atau premium polisi kumpulan melebihi RM100,000 setiap transaksi.

*Please delete where not applicable/Sila potong mana yang tidak berkenaan

Signature/Tandatangan

Name>Nama: _____

IC No./No. Kad Pengenalan _____

Date/Tarikh:

D	D	M	M	Y	Y	Y	Y

Applicable for Purchase of Group Insurance Policy / Digunakan untuk Pembelian Polisi Insurans Kumpulan

I/We (who purchase the group insurance policy) hereby confirm that I/we have sighted the original copy of the NRIC/Passport/Business Registration Certificate* and verified the details of the persons covered under the group policy.

Saya/Kami (yang membeli polisi insurans kumpulan) dengan ini mengesahkan bahawa saya/kami telah menyemak Kad Pengenalan/Pasport/Sijil Pendaftaran Perniagaan* yang asal dan mengesahkan butiran orang yang dilindungi di bawah polisi kumpulan.

*Please delete where not applicable/Sila potong mana yang tidak berkenaan

Signature/Tandatangan _____

Name>Nama: _____

IC No./No. Kad Pengenalan _____

Date/Tarikh: | | | | | | | |
D D M M Y Y Y Y

Tokio Marine Insurans (Malaysia) Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.
Tokio Marine Insurans (Malaysia) Berhad dilesenkan di bawah Akta Perkhidmatan Kewangan 2013 dan dikawalselia oleh Bank Negara Malaysia.

DEFINITIONS

Gross Profit - The amount by which the sum insured of the Turnover, Closing Stock and Work-in-Progress shall exceed the sum insured of the Opening Stock, Work-in-Progress and the Specified Working Expenses.

THE CONSEQUENTIAL LOSS POLICY

provided INDEMNITY against Loss of Earnings arising out of - FIRE, LIGHTNING, AND FIRE OCCASIONED BY EXPLOSION, and may be extended to include other perils such as EXPLOSION, SPRINKLER LEAKAGE, RIOTS & STRIKES, STORM & TEMPEST, AIRCRAFT OR ARTICLES DROPPED THEREFROM.

The scope of the Policy includes:

- Loss of Gross Profit or Revenue due to Reduction in Turnover or Output.
- Increase in cost of working - The additional expenditure incurred for the purpose of avoiding or diminishing the Reduction in Turnover or Output.
- Auditors Fees.

IMPORTANT

1. GROSS PROFIT - The sum to be insured should represent the amount by which
 - i) the sum of the turnover and the amount of the closing stock shall exceed
 - ii) the sum of the opening stock, and the amount of the Specified Working Expenses.If the selected Indemnity Period is 12 months or less, the annual amount of Gross Profit should be insured; for Indemnity Periods exceeding 12 months the sum insured should represent the anticipated Gross Profit for the period selected.
In the estimation of the Gross Profit the trend of business should be taken into account, bearing in mind that it is the Gross Profit which would have been earned during the twelve months (or longer indemnity period selected) following a fire, had the fire not occurred, which would be insured.
Specified Working Expenses are the uninsured variable charges; example 100% of Purchases (less discount received) carriage, packing, freight.
2. REBATE CLAUSE - If at the end of your financial year the sum insured on Gross Profit proves to have been in excess of the certified Gross Profit earned, a return of premium limited to 50% on the premium paid on such sum insured will be made in respect of the excess. For this reason you are recommended to include a margin in the sum insured in order that you are not penalised by under - insurance when a loss occurs.
3. INDEMNITY PERIOD - This is the maximum period immediately following a fire during which the policy will provide indemnity under the respective items.
4. For items 1 and 2 you should select the period you estimate would be necessary for the business to recover entirely from the effects of any fire.
5. WAGES
 - (a) If your business is such that all employees would be retained for the full indemnity period, then all wages should be insured under the Gross Profit item by not including wages as a specified working expense under Item 1.
 - (b) If the full cover under not (a) is unnecessary, you may decide to insured the Wages of all employees for an initial period but thereafter to insure only a percentage of the wage roll for the remainder of the Indemnity Period chosen for the Gross Profit item, provided:-
 - (i) the indemnity period relating to the Gross Profit cover is 12 months or longer;
 - (ii) the initial period where 100% wages cover operates is at least 4 weeks;
 - (iii) a minimum of 10% of the total wage roll is to be insured after the initial period;The rebate system also applies to items covering wages and it is recommended that wages sums insured also should include generous margins to allow for increasing trend or special circumstances. In all cases the sum insured should provide for all payments associated with wages such as EPF Contributions, SOCSO, Bonuses, Holiday Pay and the like. The initial period of cover should allow for the effects of the Contracts of Employment.
6. AUDITORS' FEES' - In the event of a claim under the policy it would be necessary for your Accountants to produce the figures which would be required in the preparation of the claim. Their fees for their work (which would be additional to their normal auditing of the Accounts) can be provided for by a special item, the sum insured representing your estimate of the fees likely to be incurred.

RATES

The rates of premium are moderate and depend upon the nature of the Proponent's business, being based on the ordinary Fire Insurance rates, also on the indemnity required.

Annual Policies may be effected covering from one to twenty-four months interruption.

I/We to the best of my/our knowledge hereby confirm that the statements contained in this proposal form are true and correct and I/we have not concealed, mis-represented or mis-stated any material fact.