

Appointment Of Nominees / Pelantikan Penama-penama

The following are my nominees under this policy. / Di bawah ini adalah penama-penama saya di bawah polisi ini.

Gender / Jantina : [M] Male / Lelaki [F] Female / Perempuan
 Nationality / Warganegara : [M] Malaysian / Malaysia [S] Singaporean / Singapura [O] Others / Lain-lain
 Relationship / Hubungan : [F] Father / Bapa [M] Mother / Ibu [H] Husband / Suami [W] Wife / Isteri
 [S] Son / Anak Lelaki [D] Daughter / Anak Perempuan [O] Others / Lain-lain

Nominee 1 / Penama 1

Name / Nama

NRIC No. (New) / No. KP (Baru) -- NRIC No. (Old) / No. KP (Lama)

Passport No. / No pasport Passport Expiry Date / Tarikh Luput Pasport / /
(dd / hh) (mm / bb) (yyyy / tttt)

Date of Birth / Tarikh Lahir / / Country of Birth / Negara Kelahiran
(dd / hh) (mm / bb) (yyyy / tttt)

Gender / Jantina Nationality / Warganegara (If others, please specify / Jika lain lain, sila nyatakan) _____

Relationship / Hubungan (If others, please specify / Jika lain lain, sila nyatakan) _____ % of share / % bahagian

Address / Alamat

Postcode / Poskod

Mobile Phone No. / No. Tel. Bimbit - -
Country code / Kod Negara Area code / Kod Negeri

Nominee 2 / Penama 2

Name / Nama

NRIC No. (New) / No. KP (Baru) -- NRIC No. (Old) / No. KP (Lama)

Passport No. / No pasport Passport Expiry Date / Tarikh Luput Pasport / /
(dd / hh) (mm / bb) (yyyy / tttt)

Date of Birth / Tarikh Lahir / / Country of Birth / Negara Kelahiran
(dd / hh) (mm / bb) (yyyy / tttt)

Gender / Jantina Nationality / Warganegara (If others, please specify / Jika lain lain, sila nyatakan) _____





Relationship / Hubungan (If others, please specify / Jika lain lain, sila nyatakan) _____ % of share / % bahagian

Address / Alamat

Postcode / Poskod

Mobile Phone No. / No. Tel. Bimbit - -
Country code / Kod Negara Area code / Kod Negeri

Allianz Customer Service Center

Allianz Arena, Ground Floor, Block 2A, Plaza Sentral, Jalan Stesen Sentral 5, Kuala Lumpur Sentral, 50470 Kuala Lumpur.
 Allianz Contact Center: 1 300 22 5542 E-mail: customer.service@allianz.com.my   AllianzMalaysia   allianz.com.my

Nominee 3 / Penama 3

Name / Nama

NRIC No. (New) / No. KP (Baru) - -

Passport No. / No pasport

Date of Birth / Tarikh Lahir / /
(dd / hh) (mm / bb) (yyyy / tttt)

Gender / Jantina

Relationship / Hubungan (If others, please specify / Jika lain lain, sila nyatakan) _____ % of share / % bahagian

Address / Alamat

Postcode / Poskod

Mobile Phone No. / No. Tel. Bimbit - -
Country code / Kod Negara Area code / Kod Negeri

NRIC No. (Old) / No. KP (Lama)

Passport Expiry Date / Tarikh Luput Pasport / /
(dd / hh) (mm / bb) (yyyy / tttt)

Country of Birth / Negara Kelahiran

Nationality / Warganegara (If others, please specify / Jika lain lain, sila nyatakan) _____

Nominee 4 / Penama 4

Name / Nama

NRIC No. (New) / No. KP (Baru) - -

Passport No. / No pasport

Date of Birth / Tarikh Lahir / /
(dd / hh) (mm / bb) (yyyy / tttt)

Gender / Jantina

Relationship / Hubungan (If others, please specify / Jika lain lain, sila nyatakan) _____ % of share / % bahagian

Address / Alamat

Postcode / Poskod

Mobile Phone No. / No. Tel. Bimbit - -
Country code / Kod Negara Area code / Kod Negeri


NRIC No. (Old) / No. KP (Lama)

Passport Expiry Date / Tarikh Luput Pasport / /
(dd / hh) (mm / bb) (yyyy / tttt)

Country of Birth / Negara Kelahiran

Nationality / Warganegara (If others, please specify / Jika lain lain, sila nyatakan) _____

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Trustee / Pemegang Amanah

Name / Nama

Grid for Name input

NRIC No. (New) / No. KP (Baru)

NRIC No. (New) input fields

NRIC No. (Old) / No. KP (Lama)

NRIC No. (Old) input fields

Passport No. / No pasport

Passport No. input fields

Passport Expiry Date / Tarikh Luput Pasport

Passport Expiry Date input fields (dd / hh) (mm / bb) (yyyy / tttt)

Date of Birth / Tarikh Lahir

Date of Birth input fields (dd / hh) (mm / bb) (yyyy / tttt)

Country of Birth / Negara Kelahiran

Country of Birth input fields

Gender / Jantina

Gender input field

Nationality / Warganegara

Nationality input field (If others, please specify / Jika lain lain, sila nyatakan)

Relationship / Hubungan

Relationship input field (If others, please specify / Jika lain lain, sila nyatakan)

Address / Alamat

Address input grid

Postcode / Poskod

Mobile Phone No. / No. Tel. Bimbit

Mobile Phone No. input fields

Country code / Kod Negara Area code / Kod Negeri

Signature of Trustee / Tandatangan Pemegang Amanah

Date / Tarikh

Signature Of Policy Owner / Tandatangan Pemegang Polisi

Signature of Policy Owner / Tandatangan Pemegang Polisi

Name / Nama :
NRIC No. / No. KP :
Date / Tarikh :

Signature of Witness / Tandatangan Saksi

Name / Nama :
NRIC No. / No. KP :
Date / Tarikh :

Note / Nota: A witness shall be of age eighteen (18) years and above, of sound mind and not the nominee / Saksi hendaklah umur lapan belas (18) tahun dan ke atas, berfikiran waras dan bukan seorang penama.

IMPORTANT NOTICE: THIS FORM HAS TO BE RECEIVED BY THE COMPANY DURING THE LIFETIME OF THE POLICY OWNER.
NOTIS PENTING: BORANG INI HENDAKLAH DITERIMA OLEH SYARIKAT SEMASA HAYAT PEMEGANG POLISI.

A copy of this form has this day been filed at the Head Office of ALLIANZ LIFE INSURANCE MALAYSIA BERHAD. / Satu salinan borang ini pada hari ini telah difailkan di Ibu Pejabat ALLIANZ LIFE INSURANCE MALAYSIA BERHAD.

For / Untuk ALLIANZ LIFE INSURANCE MALAYSIA BERHAD

Authorised Personnel / Personel Bertauliah

Date / Tarikh

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