

Allianz Student Personal Accident (P10) Proposal Form

Consumer Insurance Contract

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance **wholly for purposes unrelated to your trade, business or profession**, you have a duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form and disclose any other matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied, otherwise it may result in avoidance of contract, claims denied or reduced, terms changed or varied, or contract terminated.

Non-consumer Insurance Contract

Pursuant to Paragraph 4 (1) of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance for purposes 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 contract, claims denied or reduced, terms changed or varied, or contract terminated.

This duty of disclosure for Consumer and Non-consumer Insurance Contract shall continue until the time the contract is entered into, varied or renewed.

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 is inaccurate or has changed.

You should ensure that this Proposal Form is completed correctly as it forms the basis of the Insurance Contract. This basis of contract clause shall not apply if you are an individual applying for this insurance wholly for purposes unrelated to your trade, business or profession.

This Proposal Form shall form part of the Policy Contract. Policy owners are advised to read the policy carefully and understand its contents. You are encouraged to seek clarification from the Company if necessary.

The liability of the Company does not commence until acceptance of the proposal form has been intimated by the Company or policy has been issued.

Period of Insurance:

Agent Code:

From - - To - -

-

Please complete in CAPITAL LETTERS/Tick in the appropriate boxes.

PART 1 - PARTICULARS OF PROPOSER

Salutation	<input type="checkbox"/> Mr. <input type="checkbox"/> Madam <input type="checkbox"/> Miss <input type="checkbox"/> Others (please specify)		
Name	<input type="text"/> <input type="text"/> <input type="text"/>		
Address	<input type="checkbox"/> Non-residential <input type="checkbox"/> Residential		
Postcode	<input type="text"/>	City	<input type="text"/>
State	<input type="text"/>		
Country	<input type="text"/>		
Mobile No.	<input type="text"/> - <input type="text"/>	Phone No.	<input type="text"/> - <input type="text"/>
e-mail	<input type="text"/>		
ID Type	<input type="text"/> Code : [01] NRIC [02] Old IC/Others [03] Passport [04] Police/Army		
ID No.	<input type="text"/>		
Date of Birth	<input type="text"/> - <input type="text"/> - <input type="text"/>	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Nationality	<input type="checkbox"/> Malaysian <input type="checkbox"/> Others (please specify)		



PART 2 - PARTICULARS OF SCHOOL

Name																								
Address <input type="checkbox"/> Non-residential <input type="checkbox"/> Residential																								
Postcode					City																			
State																								
Country																								
Phone No.					-					Fax No.		-												
e-mail																								

PART 3 - PLAN REQUIRED AND PREMIUM DETAILS

Plan	Premium (RM)
Plan P10	10

PART 4 - DATA PRIVACY AND DISCLOSURE OF PERSONAL INFORMATION

Protection of your privacy is very important to us. Please visit our website at allianz.com.my to view our Privacy Statement (NOTICE TO CUSTOMERS OF ALLIANZ GENERAL INSURANCE COMPANY (MALAYSIA) BERHAD ON THE PERSONAL DATA PROTECTION ACT 2010).

Disclosure and Consent

The personal data you supply as an individual to purchase the above insurance will be used by the Allianz Group and its agents to facilitate the performance of our function as an insurance company according to our Privacy Statement. By signing on this proposal form you consent to the use of your personal data for the purposes as stated in our Privacy Statement.

PART 5 - DECLARATION

I hereby declare and warrant that the answers/information given in every respect are true and correct and I have not withheld any information likely to affect the acceptance of this proposal and I agree that this proposal and declaration shall be the basis of the contract between the Company and myself and I further agree that the liability of the Company does not commence until this proposal has been intimated and accepted by the Company.

- -

Signature of Proposer

Date

Name																								
ID Type			Code : [01] NRIC [02] Old IC/Others [03] Passport [04] Police/Army																					
ID No.																								

Note: 1. Where the Insured Person is a child aged below eighteen (18) years, this proposal must be signed by his/her parent/guardian. Please state Name, ID Type and ID No. of the Parent/Guardian.

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 Email: customer.service@allianz.com.my [f AllianzMalaysia](https://www.facebook.com/AllianzMalaysia) [allianz.com.my](http://www.allianz.com.my)