

# MONEY INSURANCE

## PROPOSAL FORM

Allianz General Insurance Company (Malaysia) Berhad (735426-V) is licensed under the Financial Services Act 2013 (FSA) and regulated by Bank Negara Malaysia (BNM).

### NON-CONSUMER INSURANCE CONTRACT

Pursuant to Paragraph 4 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, claim denied or reduced, terms changed or varied, or contract terminated.

**This duty of disclosure shall continue until the time the contract is entered into, varied or renewed.**

The liability of the Company does not commence until acceptance of the proposal form has been intimated by the Company or official cover note is issued.

Account No.:

Policy No.:

Cover Note No.:

ALL QUESTIONS MUST BE ANSWERED BY THE PROPOSER AND APPROPRIATELY MARKED '✓' WHERE APPLICABLE.

### COMPANY DATA

Name of Proposer (in block letters)	<input type="text"/>
Company No:	<input type="text"/>
<b>Goods and Services Tax (GST) Related Questions</b>	
Are You registered for GST?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please provide:	
If you are a Business Entity, are You a Sole Proprietor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, is the subject matter insured for	<input type="checkbox"/> Business <input type="checkbox"/> Non Business <input type="checkbox"/> Both
	i) GST Registration Date: <input type="text"/> - <input type="text"/> - <input type="text"/> Day Month Year ii) GST Registration No: <input type="text"/>
Postal Address	<input type="text"/>
Postcode	<input type="text"/> State
Tel. No.	<input type="text"/> O <input type="text"/> HP <input type="text"/>
Email:	<input type="text"/>
Business, Trade or Occupation of Proposer	<input type="text"/>
Address of premises to which this insurance applies	<input type="text"/>
Postcode	<input type="text"/> State
Name of Banker	<input type="text"/>
Address	<input type="text"/>
Period of Insurance	From <input type="text"/> Day <input type="text"/> Month <input type="text"/> Year To <input type="text"/> Day <input type="text"/> Month <input type="text"/> Year

### THE CIRCUMSTANCES OR SITUATION

	LIMIT OF LIABILITY FOR ANY ONE CLAIM WHETHER IN RESPECT OF ONE OCCURRENCE OR OTHERWISE	ESTIMATED ANNUAL CARRYINGS
SECTION A Do you require cover in respect of cash (other than cash drawn for wages or salaries) kept in locked safe or strongroom? If so, please state the amount of cover required.		
SECTION B Money in transit from the bank to the Insured's premises for the payment of wages salaries other earnings or petty cash from the time the money is received at the bank by the authorised employees of the insured until delivered at the Insured's premises and (except in regards to petty cash) whilst there and until paid out.  Cheques drawn by the insured to provide for such payments are covered in transit from the Insured's premises to the bank.  Provided that all money not paid on the day on which it is received from the bank be secured in locked safe or locked strongroom after business hours.		
SECTION C Money (other than as described in Section B) in the personal custody of the Insured's authorised employees whilst in direct transit between the Insured's premises and the bank.		
SECTION D Money (other than described in Section B & C) in the personal custody of the Insured's authorised employees whilst in transit from the time of receipt until delivered at the Insured's premises or bank.		

## OTHER DETAILS

1. (a) How often are journeys with cash made? (b) Will all carrying be made during the hours of daylight? (c) Please describe the journey or transit to be insured and state approximate distance and whether made on foot or by private or public conveyance. (d) How many employees will be engaged in carrying money? (e) Will such employees be armed or accompanied by an armed guard? (f) Please give details of any special safety precautions taken.	(a) _____ (b) _____ (c) _____ (d) _____ (e) _____ (f) _____
2. In respect of cash drawn for Wages and Salaries:- (a) What period will elapse after arrival at your Premises until paid out? (b) If not paid out on the same day as drawn from Bank is it kept in Locked Safe or Strongroom overnight? (c) What is the amount of cover required in respect of Wages and Salaries not paid out on the same day as drawn from Bank?	(a) _____ (b) _____ (c) _____
3. In respect of cash insured in Safe or Strongroom please state:- (a) Maker's name of Safe or Strongroom and approximate cost (b) Whether marked Fire / Thief resisting (c) Number of keys and by whom held (d) Are the keys removed from the Proposer's premises when uninhabited or overnight? N.B. - If more than one Safe is used in respect of cash covered as per 2 & 3, please give details of each safe.	(a) _____ (b) _____ (c) _____ (d) _____
4. Are any of the employees engaged in carrying cash covered under a Fidelity Guarantee Policy? If so, please give details.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. In respect of the risks you now desire to insure against have you ever sustained a loss? If so, please give details.	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. (a) Have you ever submitted a Proposal in respect of the risk you now desire to insure against? (b) Are you now insured? If so, please give particulars.	(a) <input type="checkbox"/> Yes <input type="checkbox"/> No (b) <input type="checkbox"/> Yes <input type="checkbox"/> No
7. In respect of the risks to which this proposal applies has any Insurer: (a) Declined your Proposal? (b) Cancelled or refused to renew your policy? (c) Required an increased Premium on renewal? If so, please give particulars.	(a) <input type="checkbox"/> Yes <input type="checkbox"/> No (b) <input type="checkbox"/> Yes <input type="checkbox"/> No (c) <input type="checkbox"/> Yes <input type="checkbox"/> No

### MONEY INSURANCE

GRANTS an indemnity againsts LOSS OF MONEY (i.e. Cash, Bank Notes, Current Notes, Cheques, Postal Orders, Money Orders) by ANY CAUSE WHATSOEVER whilst in transit and in the Circumstances or Situation described in the Policy.

The Policy does not however extend to cover any consequence whether direct or indirect of:-

- (a) War invasion act of foreign enemy hostilities (whether war be declared or not) civil war rebellion revolution insurrection strike military or usurped power or confiscation or destruction by order of any Government or Public Authority.
- (b) Riot or Civil Commotion or loss by fraud or dishonesty of employees unless the Policy has been endorsed specially to cover these risks. If desired arrangements can also be made for the Policy to be extended to cover loss of Cash in Locked Safe or Strongroom by Fire Burglary or Housebreaking.

### 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 prorata 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 onus 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.

### GOODS AND SERVICES TAX (GST)

#### Goods And Services Tax Notice

You are advised to review the adequacy of your Sum Insured as Goods and Services Tax ("GST") may have an impact on your claims settlement as stated below.

#### Goods And Services Tax Impact On Claims Settlement

##### Claims Settlement

We will pay your claim inclusive of the Goods and Services Tax on items which are taxable supplies, up to the limit of the Sum Insured.

In the event that you are entitled to claim for the Input Tax Credit and if we make a payment under this policy as compensation to you, we will reduce the amount of the payment by deducting your Input Tax Credit entitlement irrespective of whether you have or have not claimed the Input Tax Credit, up to the limit of the Sum Insured.

### DECLARATION

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 facts.

I/We agree that this statements and declaration contained in this proposal form shall be the basis of the contract of insurance with the Company and are deemed to be incorporated in the contract.

Date 



 / 



 / 



  
 Day                  Month                  Year

.....  
 Signature of Proposer / Company's Chop



## BUTIR-BUTIR LAIN

1. (a) Berapa kerapkah perjalanan membawa wang itu dilakukan? (b) Adakah semua perjalanan tersebut dibuat pada waktu siang? (c) Sila jelaskan tentang perjalanan atau transit untuk diinsuranskan dan sebutkan anggaran jarak dan sama ada secara berjalan kaki atau menaiki pengangkutan sendiri atau awam? (d) Berapakah ramai pekerja yang terlibat membawa wang itu? (e) Adakah pekerja tersebut akan diberi senjata atau ditemani oleh seorang pengawal keselamatan bersenjata? (f) Sila berikan butir-butir tentang sebarang langkah keselamatan khas yang diambil.	(a) _____ (b) _____ (c) _____ (d) _____ (e) _____ (f) _____
2. Bagi wang tunai yang dikeluarkan sebagai Upah dan Gaji:- (a) Apakah jarak waktu antara masa wang tersebut sampai di Premis anda hingga ia dikeluarkan untuk dibayar gaji? (b) Selepas dikeluarkan dari bank, jika gaji tidak dibayar pada hari yang sama, adakah wang tersebut disimpan di dalam Peti Besi atau Bilik Kebal berkunci semalaman? (c) Berapa amaun perlindungan yang diperlukan bagi Upah dan Gaji yang dikeluarkan daripada bank tetapi tidak dibayar pada hari yang sama?	(a) _____ (b) _____ (c) _____
3. Bagi wang tunai diinsuranskan itu yang disimpan di dalam Peti Besi atau Bilik Kebal, sila sebutkan:- (a) Nama Pembuat Peti Besi atau Bilik Kebal dan anggaran harganya. (b) Adakah ia mempunyai tanda Tahan Api / Pencuri? (c) Bilangan kunci dan dipegang oleh siapa? (d) Adakah kunci-kunci tersebut dikeluarkan daripada premis si Pencadang bila ia tidak dihuni atau pada waktu malam? Perhatian: Jika lebih daripada satu peti besi digunakan untuk melindungi wang tunai seperti dalam 2 & 3, sila berikan butir-butir tentang setiap peti besi.	(a) _____ (b) _____ (c) _____ (d) _____
4. Adakah mana-mana pekerja yang terlibat membawa wang tunai yang dilindungi itu di bawah Polisi Jaminan Setia? Jika ada, sila berikan butir-butir.	<input type="checkbox"/> Ya <input type="checkbox"/> Tidak
5. Bagi risiko-risiko yang anda minta perlindungan, pernahkah anda mengalami apa-apa kerugian? Jika pernah, sila berikan butir-butir.	<input type="checkbox"/> Ya <input type="checkbox"/> Tidak
6. (a) Pernahkah anda menghantar sesuatu Cadangan bagi risiko yang anda minta perlindungan sekarang? (b) Adakah anda sekarang diinsuranskan? Jika ada, sila berikan butir-butir.	(a) <input type="checkbox"/> Ya <input type="checkbox"/> Tidak (b) <input type="checkbox"/> Ya <input type="checkbox"/> Tidak
7. Bagi risiko yang berkaitan dengan cadangan sekarang, pernahkah sebarang Penanggung Insurans: (a) Menolak Cadangan anda? (b) Membatal atau enggan membaharui Polisi anda? (c) Memerlukan kenaikan Premium bagi pembaharuan tersebut? Jika pernah, sila berikan butirannya.	(a) <input type="checkbox"/> Ya <input type="checkbox"/> Tidak (b) <input type="checkbox"/> Ya <input type="checkbox"/> Tidak (c) <input type="checkbox"/> Ya <input type="checkbox"/> Tidak

### INSURANS WANG

DIPERKENANKAN tanggung rugi ke atas KEHILANGAN WANG (iaitu Wang tunai, Nota Bank, Nota Mata Wang, Cek, Wang Pos, Kiriman Wang) atas APA-APA SEBAB SEKALIPUN ketika dalam transit dan dalam Hal-Hal atau Keadaan yang dijelaskan dalam Polisi ini.

Polisi ini walau bagaimanapun tidak diperluaskan untuk melindungi sebarang akibat langsung atau tidak langsung ekoran daripada:-

- (a) Perang, serangan, tindakan musuh asing, perseteruan (sama ada perang diisytiharkan atau tidak), perang saudara, penentangan, revolusi, kebangkitan, mogok, kuasa tentera atau rebutan kuasa, perampasan atau pemusnahan atas perintah mana-mana Kerajaan atau pihak Berkuasa Awam;
- (b) Rusuhan atau Kekacauan Awam atau kerugian kerana penipuan oleh atau ketidakjujuran para pekerja kecuali jika Polisi ini telah diendorokan khas untuk melindungi risiko-risiko tersebut. Jika berhajat, perluasan Polisi ini boleh diuruskan untuk melindungi kerugian Wang Tunai di dalam Peti Besi atau Bilik Kebal Berkunci terhadap Kebakaran, Pecah Masuk atau Kecurian.

### WARANTI PREMIUM

Telah menjadi syarat khas yang utama dan mutlak bagi kontrak insurans ini bahawa premium yang mesti dibayar hendaklah dibayar dan diterima oleh pihak penanggung insurans dalam masa enam puluh (60) hari dari tarikh Polisi / Pengendorsan / Sijil Pembaharuan ini mula berkuat kuasa.

Jika syarat tadi tidak dipatuhi, kontrak insurans ini akan terbatal secara automatik dan pihak penanggung insurans akan diberi hak ke atas premium secara prorata bagi tempoh yang melindungi risiko.

Jikalau premium yang boleh dibayar menurut waranti ini diterima oleh seorang ejen berkuasa bagi pihak penanggung insurans, bayaran tersebut hendaklah disifatkan telah diterima oleh pihak penanggung insurans bagi tujuan-tujuan waranti ini manakala kewajipan (onus) untuk membuktikan bahawa premium yang boleh dibayar itu telah diterima oleh seseorang, termasuk seorang ejen insurans, yang tidak diberi kuasa untuk menerima premium berkenaan adalah terletak pada pihak penanggung insurans.

Tertakluk kepada terma-terma dan syarat-syarat polisi ini ataupun sebaliknya.

### CUKAI BARANGAN DAN PERKHIDMATAN (GST)

#### Notis Cukai Barangan Dan Perkhidmatan

Anda dinasihatkan untuk mengkaji kecukupan Jumlah Diinsuranskan anda kerana Cukai Barangan dan Perkhidmatan boleh memberi kesan kepada penyelesaian tuntutan anda seperti dibawah.

#### Kesan Cukai Barangan Dan Perkhidmatan Terhadap Penyelesaian Tuntutan

##### Penyelesaian Tuntutan

Kami akan membayar tuntutan anda termasuk Cukai Barangan dan Perkhidmatan pada item bekalan yang dikenakan cukai, sehingga had Jumlah Diinsuranskan.

Sekiranya anda layak untuk membuat tuntutan bagi Kredit Cukai Input dan sekiranya kami membuat bayaran di bawah polisi ini sebagai pampasan kepada anda, kami akan mengurangkan jumlah bayaran dengan menolak kelayakan Kredit Cukai Input anda tidak kira samada anda telah menuntut input Kredit Cukai Input, tertakluk kepada had Jumlah Diinsuranskan.

### AKUAN

Saya/Kami dengan ini mengesahkan bahawa menurut apa yang saya/kami sesungguhnya ketahui, pernyataan yang terkandung dalam borang cadangan ini adalah betul dan benar dan saya/kami tidak menyelindung, salah menyatakan atau salah memberikan sebarang fakta matan.

Saya/Kami bersetuju bahawa pernyataan dan akuan yang terkandung dalam borang cadangan ini hendaklah dijadikan asas kontrak bagi insurans ini dengan pihak Syarikat dan ia juga hendaklah disifatkan telah digabungkan dalam kontrak ini.

Tarikh

Hari

Bulan

Tahun

.....  
Tandatangan Pencadang / Mohor Syarikat