



Allianz General Insurance Company (Malaysia) Berhad 200601015674 (735426-V)
(Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia)

Group Travel Personal Accident

for Shopee Mobile Malaysia Sdn. Bhd.

Master Policy No. 24PKL0000018

The benefit(s) payable under eligible product is protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact Allianz General Insurance Company (Malaysia) Berhad or PIDM (visit www.pidm.gov.my).

Group Travel Personal Accident Policy

WHEREAS the **Policyholder** described in the **Policy** schedule by a proposal or declaration which shall be the basis of this contract and is deemed to be incorporated herein, has applied to **Allianz General Insurance Company (Malaysia) Berhad (Company No. 200601015674 (735426-V))** (hereinafter called the "**Company**") for the insurance hereinafter contained and the **Insured Person** has paid or has agreed to pay to the **Company** the premium as consideration for such insurance for the period stated herein.

NOW THIS POLICY OF INSURANCE WITNESSETH that if during the **Period of Insurance** the **Insured Person** sustains **Injury** caused by an **Accident** as hereinafter defined, which shall solely and independently of any other cause result in such **Insured Person's** death or disablement as hereinafter defined, the **Company** will pay to the **Insured Person** or in the event of death, to the **Insured Person's** legal representative, the sum(s) of money for the relevant benefit, subject to the terms, exclusion, provisos and conditions of and endorsed on this **Policy**.

Table 1 - Schedule of Benefits

Benefits		Domestic	Overseas (Asia/Worldwide)
		(RM)	(RM)
(A) Personal Accident Benefits			
1	Death due to Accident (Principal Sum Insured)	100,000	150,000
2	Permanent Disablement due to Accident (up to)		
(B) Medical Related Benefits			
3	Medical Expenses (up to)	12,000	150,000
4	Hospital Income	100 per day up to 3,000	350 per day up to 15,000
(C) Travel Inconvenience Benefits			
5	Deposit or Trip Cancellation (up to)	1,000	5,000
6	Travel Curtailment (up to)	1,000	5,000
7	Personal Luggage or Personal Effect (up to)	500	5,000
8	Luggage Delay	100 (min. 6 hours)	200 per 6 hours up to 800
9	Travel Delay	100 per 6 hours up to 1,500	300 per 6 hours up to 2,000

(D) Optional Riders (with additional premium)			
Optional Rider 1			
10	Sports Activity	Available	Available
Optional Rider 2			
11	High Altitude Mountaineering	Not Available	Available
Available for Sports Activities listed under Optional Rider 1 and Optional Rider 2			
12	Damage to Sports Equipment (up to)	300	1,000

Part 1 – Benefits

The following benefits are payable for each **Journey/Trip** up to the **Sum Insured** / relevant benefit amount as stated in the **Schedule** according to the plan selected by the **Insured Person** and subject to the terms and conditions of this **Policy**.

A. Personal Accident Benefits

1 – Death due to Accident

In the event of an **Accident** while on a **Journey/Trip** during the **Period of Insurance** causing an **Injury** resulting in death within three hundred sixty-five (365) days from the date of such **Accident**, the **Company** will pay the death benefit according to the percentage of the **Sum Insured** as stated in Table 2 - Scale of Compensation.

2 – Permanent Disablement due to Accident

In the event of an **Accident** while on a **Journey/Trip** during the **Period of Insurance** causing **Injury** resulting in permanent disablement (verified by a **Medical Practitioner**) set out in Table 2 - Scale of Compensation below within three hundred sixty-five (365) days from the date of such **Accident**, the **Company** will pay the **Permanent Disablement** benefit according to the percentage of the **Sum Insured** for the relevant type of **Permanent Disablement** as stated in Table 2 - Scale of Compensation.

Scale of Compensation	Percentage (%) of Sum Insured
Death due to Accident	100%
Permanent Disablement due to Accident	100%
Total Paralysis from neck down	100%
Loss of two limbs from ankle or wrist down	100%
Permanent loss of sight of both eyes or hearing	100%
Loss of sight of one eye or hearing in one ear and one limb	50%
Loss of sight of one eye or hearing in one ear	50%
Loss of one limb from ankle or wrist down	50%
Loss of speech*	50%

Where the **Injury** is not specified, the **Company** reserves the right to adopt an appropriate percentage of the **Sum Insured** for the disablement which, in its opinion, is not inconsistent with the provisions of the Scale of Compensation.

Permanent total loss of use of a body part shall be treated as loss of the part of the body.

*Loss of speech shall mean total permanent inability to communicate verbally.

Benefit (A)1 (Death due to **Accident**) and Benefit (A)2 (**Permanent Disablement** due to **Accident**) share the same **Sum Insured** limit.

The aggregate of all percentages payable under Table 2 - Scale of Compensation in respect of all **Accidents** during the entire **Period of Insurance** shall not exceed one hundred percent (100%) of the **Sum Insured**.

In the event a total of one hundred percent (100%) of the **Sum Insured** has been paid during the **Period of Insurance**, all insurance coverage for the relevant the **Insured Person** under this **Policy** shall immediately cease to be in force and upon payment of the **Sum Insured**, the **Company's** obligation to such **Insured Person** under this **Policy** shall be fully discharged.

Other losses lesser than one hundred percent (100%), if having been paid shall reduce the **Sum Insured** by that amount from the **Date of Accident** until the expiry of the **Period of Insurance**. Notwithstanding this, coverage for the remaining **Insured Person(s)** covered under this **Policy**, where applicable shall remain intact.

B. Medical Related Benefits

1 – Medical Expenses

In the event the **Insured Person** suffers death, **Injury** during the **Journey/Trip** within or outside Malaysia or **Illness** during the **Journey/Trip** outside Malaysia, the **Company** will reimburse the **Insured Person** reasonable fees or charges or expenses incurred, up to the amount specified in the **Schedule**, for:-

- (a) Medical, surgical, hospital or nursing home charges;
- (b) Emergency dental treatment or surgery when required due to an **Injury** sustained in an **Accident** which the treating dentist certifies in writing;
- (c) Ambulance fees; and
- (d) Alternative Medicine.

*Alternative Medicine

The **Company** will reimburse the **Insured Person** up to a sublimit of Ringgit Malaysia Five Hundred (RM500) for the costs for **Alternative Medicine** incurred by the **Insured Person** due to an **Accident** or **Illness** during the **Journey/Trip**. The applicable sublimit shall form part of the overall amount for **Medical Expenses**.

2 – Hospital Income

In the event the **Insured Person** is confined to hospital as an inpatient due to an **Accident** during the **Journey/Trip** within or outside Malaysia or **Illness** during the **Journey/Trip** outside Malaysia, the **Company** will pay the **Insured Person** the amount specified in the **Schedule** for each complete twenty-four (24) hours of **Hospitalisation** during the period of the **Journey/Trip**.

C. Travel Inconvenience Benefits

1 – Deposit or Trip Cancellation

- (a) The **Company** will pay for expenditure paid which are non-recoverable and/or the expenditure contracted to be paid which are accountable/liable for in relation to the **Insured Person's** accommodation, transport charges, additional travel expenses, excursion charges if the **Insured Person's Journey/Trip** is cancelled in the event of the following:-
- (i) the **Insured Person's** death, death of any of the **Insured Person's Family Member** or the **Insured Person's Travelling Companion**, provided such death occurs within sixty (60) days prior to the **Insured Person** original scheduled departure date;
 - (ii) the **Insured Person's** confinement, confinement of any of the **Insured Person's Family Member** or the **Insured Person's Travelling Companion** in a hospital on the scheduled departure date arising from **Injury** or **Serious Illness**;
 - (iii) **Injury** or **Illness** sustained by the **Insured Person**, resulting in the treating **Medical Practitioner** certifying in writing that the **Insured Person** is unfit to travel on the scheduled departure date;
 - (iv) **Injury** or **Serious Illness** sustained by any of the **Insured Person's Family Members** who were scheduled to travel with the **Insured Person**, resulting in the treating **Medical Practitioner** certifying in writing that the **Family Member** is unfit to travel on the scheduled departure date;
 - (v) the **Insured Person** and/or the **Insured Person's Travelling Companion** being placed under compulsory quarantine or isolation by order of the relevant government authorities or a recognised public health authority on the **Insured Person's** scheduled departure date due to being diagnosed with Covid-19;
 - (vi) serious damage to the **Insured Person's Home** caused by fire, flood or similar **Natural Disaster** which requires the **Insured Person's** presence on the scheduled departure date;
 - (vii) **Natural Disaster** at the scheduled destination which prevents the **Insured Person** from commencing the **Journey/Trip**, provided that the **Natural Disaster** occurred not more than one (1) month prior to the **Insured Person's** scheduled departure date.
- (b) The **Company** will not pay the benefit under this Section if:-
- (i) this **Policy** is purchased and payment of premium is made less than seven (7) days prior to the **Insured Person's** departure for the **Insured Person's Journey/Trip**; or
 - (ii) the **Insured Person** purchased this **Policy** and made the payment of the premium after the commencement or announcement of the **Natural Disaster** or after the occurrence of any of the other incidents under Section C(1)(a);

- (iii) the **Insured Person** purchased this **Policy** and made the payment of the premium immediately after the **Insured Person** suffer an **Injury** or the **Insured Person** is being diagnosed with an **Illness**.

2 – Travel Curtailment

- (a) In the event of travel curtailment by the **Insured Person** during the **Journey/Trip** due to the events set out in Section C(2)(b) thereby requiring the **Insured Person** to interrupt the **Journey/Trip** or return to Malaysia before the completion of the **Insured Person’s Journey/Trip**, the **Company** will pay the **Insured Person** up to the amount specified in the **Schedule** for:-
 - (i) the unrecoverable paid charges or expenses of the unused and non-recoverable part of the **Insured Person’s Journey/Trip**, which shall be computed in proportion to the unused days paid or contracted to be paid by the **Insured Person**; and
 - (ii) either the additional cost to change the **Insured Person’s** return ticket to a different date or the cost to purchase a new return ticket which is no superior than the original class if the **Common Carrier** is unable to accommodate a change in the initial return ticket.
- (b) This benefit is payable in the event of:-
 - (i) death, **Injury** (causing the **Insured Person** or **Insured Person’s Travelling Companion** to be unfit to travel or continue with the **Insured Person’s Journey/Trip** as certified in writing by a **Medical Practitioner**) or **Serious Illness** suffered by the **Insured Person** or the **Insured Person’s Travelling Companion** during the **Journey/Trip**;
 - (ii) unexpected death of any of the **Insured Person’s Family Member**;
 - (iii) **Illness** or **Accident** suffered by the **Insured Person’s Family Member** which requires admittance into hospital for more than forty-eight (48) hours;
 - (iv) the **Insured Person** or **Insured Person’s Travelling Companion** being placed under compulsory quarantine or isolation by order of the relevant government authorities or a recognised public health authority of the country which the **Insured Person** is visiting during the **Insured Person’s Journey/Trip**, due to being diagnosed with Covid-19;
 - (v) Serious damage to the **Insured Person’s Home** caused by fire, flood or similar **Natural Disaster** which requires the **Insured Person’s** presence;
 - (vi) **Natural Disaster** at the **Insured Person’s** scheduled destination which prevents the **Insured Person** from continuing the **Insured Person’s** scheduled **Journey/Trip**;
- (c) In the event the **Insured Person** is required to stay at the **Insured Person’s** travel destination beyond the **Insured Person’s** scheduled return date as a result of an **Injury** (causing the **Insured Person** or **Insured Person’s Travelling Companion** to be unfit to travel or continue with **Journey/Trip** as certified in writing by a **Medical Practitioner**) or **Serious Illness** suffered by the **Insured Person** or **Insured Person’s Travelling Companion** during **Journey/Trip**, the **Company** will pay the **Insured Person** up to the amount specified in the **Schedule** for:-
 - (i) either the additional cost to change the **Insured Person’s** return ticket to a different date or the cost to purchase a new return ticket if the **Common Carrier** is unable to accommodate a change in the initial return ticket, provided that:-

- the **Insured Person** or the **Insured Person's Travelling Companion** is confined to a hospital on the scheduled return date; or
 - the treating **Medical Practitioner** certifies in writing that the **Insured Person** or **Insured Person's Travelling Companion** is unfit to travel on the scheduled return date; and
 - the travel class of the new return ticket purchased is no superior than the travel class of the original return ticket; and
- (ii) The reasonable additional accommodation expenses incurred for the duration the **Medical Practitioner** certifies in writing that the **Insured Person** or **Insured Person's Travelling Companion** is unfit to travel on the scheduled return date.
- (d) The **Company** will not pay the paid charges or expenses of the unused return ticket if the **Company** pays the cost of change of the **Insured Person's** return ticket to a different date or the cost to purchase a new return ticket.

3 – Personal Luggage or Personal Effects

- (a) In the event that the **Insured Person's Personal Luggage** and **Personal Effects** (including clothing worn) are stolen, damaged or permanently lost during the **Insured Person's Journey/Trip**, the **Company** will pay for the following losses less a deduction for any the wear, tear or a depreciation:-
- (i) Any damage to a loss of the **Insured Person's Personal Luggage** and **Personal Effects** due to theft or attempted theft provided that the **Personal Luggage** and **Personal Effects** are carried by the **Insured Person** or kept locked in the local accommodation or lodging or deposited with and are under the care of a hotel;
 - (ii) Damage to or loss of the **Insured Person's Personal Luggage** and **Personal Effects** by the **Common Carrier** subject always to any applicable sub-limits set out in Section C(3)(b).
- (b) The maximum amount the **Company** will pay for any item is: -
- (i) Ringgit Malaysia Five Hundred (RM500) in respect of every single article, pair or set of articles;
 - (ii) The proportionate part of the value of an article belonging to a pair or set in the event of loss or damage;
 - (iii) Ringgit Malaysia Five Hundred (RM500) (for **Journey/Trip** within Malaysia) and Ringgit Malaysia One Thousand (RM1,000) (for **Journey/Trip** outside Malaysia) in aggregate in respect of **Smart Devices**.
- (c) The **Company** will not pay for:-
- (i) Loss or damage to jewellery, howsoever occasioned;

- (ii) Loss or damage to sports equipment except where the Additional Sports (Optional Rider) is purchased (the applicable terms and conditions are as per Part 1 (D) (Additional Sports (Optional Rider)) of this Policy);
- (iii) Loss or damage due to atmospheric or climatic conditions, the wear, tear or depreciation, moth or vermin, gradual deterioration, mechanical or electrical breakdown or derangement, inherent vice;
- (iv) Loss or damage by theft from an unattended vehicle unless it was completely out of sight in the trunk of the vehicle which was fully locked with its windows closed, and there was visible evidence of forced entry;
- (v) Loss or damage not reported to the authorities within twenty-four (24) hours of discovery of loss;
- (vi) Loss or damage in respect of which the **Insured Person** would have received a replacement or compensation either from the **Common Carrier** or others.

4 – Luggage Delay

- (a) In the event that the **Insured Person's** checked-in luggage is delayed, mishandled, misdirected or misplaced for at least six (6) hours from the time of arrival at a scheduled travel destination until the time the **Insured Person** receives the **Insured Person's** luggage, the **Company** will pay the **Insured Person** the amount specified below:
 - (i) Ringgit Malaysia One Hundred (RM100) only for travel destination within Malaysia. The same amount is applicable to luggage delay upon returning to **Insured Person's Home**;
 - (ii) Ringgit Malaysia Two Hundred (RM200) for each consecutive six (6) hours of luggage delay, up to Ringgit Malaysia Eight Hundred (RM800) for travel destination outside Malaysia.
- (b) Upon returning to Malaysia, in the event that the **Insured Person's** checked-in luggage is delayed, mishandled, misdirected or misplaced for at least six (6) hours from the time of arrival in Malaysia, the **Company** will pay the **Insured Person** a lump sum of Ringgit Malaysia Two Hundred (RM200). This benefit is only applicable to **Journey/Trip** outside Malaysia.
- (c) The **Company** will not pay if the **Insured Person** does not report to the **Common Carrier** within twenty-four (24) hours of discovery that the **Insured Person's** luggage is delayed, mishandled or lost.

5 – Travel Delay

- (a) In the event that the **Insured Person's Common Carrier** is delayed, rescheduled, rerouted or cancelled resulting in a travel delay for at least six (6) hours based on the time specified in the confirmed booking of the **Common Carrier**, the **Company** will pay the **Insured Person** in either

the departure or arrival time, whichever has a longer duration, up to the amount specified in the **Schedule**.

- (b) The delay whether in departure or arrival, or the cancellation of the **Common Carrier** as the case may be, must be verified in writing by the **Common Carrier** or their handling agents and such verification must indicate the original scheduled departure or arrival time and the actual departure or arrival time of the **Common Carrier**.
- (c) In the event the **Insured Person's Common Carrier's** scheduled departure is rescheduled to an earlier date or time by the operator of the **Common Carrier**, the **Company** will pay the **Insured Person** a lump sum amount of Ringgit Malaysia One Hundred (RM100) for **Journey/Trip** within Malaysia, or Ringgit Malaysia Three Hundred (RM300) for **Journey/Trip** outside Malaysia, subject always to written verification of the rescheduling from the **Common Carrier** or their handling agents.
- (d) The **Company** will not pay:-
 - (i) for any delay, rescheduling, rerouting or cancellation arising from a strike or industrial action which began or was announced before the issue date of the **Insured Person's Policy** or was announced on the date the **Insured Person's** travel tickets or confirmation of booking was issued;
 - (ii) for any delay, rescheduling, rerouting or cancellation which the **Insured Person** is made aware of forty-eight (48) hours prior to the original scheduled departure time as stated in the **Insured Person's** travel ticket; and
 - (iii) for any additional cost incurred, including but not limited to the cost to repurchase a new ticket and additional accommodation charges.

D. Additional Sports (Optional Rider)

This **Policy** is extended to cover the **Insured Person** in respect of all benefits stated in the **Schedule** in the event the **Insured Person** suffers loss which can be claimed during the activities listed below if additional premium is paid.

1 – Optional Rider 1 (Sports Activity)

- (a) The **Company** will pay compensation under the relevant benefit(s) of this **Policy** if the loss suffered by the **Insured Person** is due directly to the following sports activities undertaken during a **Journey/Trip**:-
 - (i) Water Sports – rafting, canoeing and kayaking involving white water (class 4 and below), rowing, yachting, parasailing, surfing, windsurfing (boardsailing), jet skiing, scuba diving

- and underwater activities involving the use of any artificial breathing apparatus (up to fifty (50) meters' water depth) (applicable to **Journey/Trip** within and outside Malaysia).
- (ii) Winter Sports – ice skating and snowboarding, skiing, sledging and snowmobiling. (applicable to **Journey/Trip** outside Malaysia only).
 - (iii) Others – mountaineering (not involving the use of ropes and other climbing equipment) up to 3,500 metres (for **Journey/Trip** outside Malaysia) or 4,500 metres (for **Journey/Trip** within Malaysia) or the base camp whichever is lower, sky diving, hang gliding, bungee jumping, zorb ball riding, sphereing, orbing, hot air balloon and all-terrain vehicle (ATV). Any mountaineering or climbing activities in Nepal shall be excluded under this optional rider (applicable to **Journey/Trip** within and outside Malaysia).

(b) The **Company** will not pay if the **Insured Person** does not exercise reasonable care and fail to comply with all the safety requirements when undertaking the relevant sports activity.

2 – Optional Rider 2 (High Altitude Mountaineering)

Subject to provision that such sport activity/trip needs to be accompanied by a guide certified by local authorities:-

- (a) If the **Insured Person** suffers loss covered under the relevant benefits of this **Policy** while mountaineering (not involving the use of ropes and other climbing equipment) up to five thousand five hundred (5,500) metres or the base camp, whichever is lower, the **Company** will pay the **Insured Person** compensation under the relevant benefit provided the maximum duration of the mountaineering undertaken is not more than thirty (30) days. Any mountaineering or climbing activities in Nepal shall be excluded under this optional rider. For the avoidance of doubt, this Optional Rider 2 is applicable to **Journey/Trip** outside Malaysia only.
- (b) The **Company** will not pay if the **Insured Person** does not exercise reasonable care and fail to comply with all the safety requirements when undertaking the relevant sports activity.

3 – Damage to Sports Equipment

- (a) In the event of any damage to the **Insured Person's Sports Equipment** utilised for the **Sports Activity** listed under Section D (1) and (2), the **Company** will reimburse the **Insured Person** for any reasonable costs incurred for the replacement or repair of such **Sports Equipment**, per incident per **Journey/Trip**.
- (b) The **Company** will not pay for:-
 - (i) Loss or damage due to wear and tear, or any inherent defects;

- (ii) Loss or damage arising from theft from an unattended vehicle unless it was completely out of sight in the trunk of the vehicle which was fully locked with its windows closed, and there was visible evidence of forced entry;
- (iii) Damage that is covered by a manufacturer's warranty;
- (iv) Loss or damage in respect of which the **Insured Person** would have received replacement or compensation either from the **Common Carrier** or others.

Part 2 – Conditions

1. Condition Precedent to Liability

The due observance and fulfillment of the terms and conditions of this **Policy** insofar as they relate to anything to be done by or not to be done by the **Insured Person** or his/her legal representative shall be conditions precedent to any liability of the **Company** to make any payment under this **Policy**.

2. Notice

Every notice or communication to be given or made under this **Policy** by the **Insured Person** or **Insured Person's** legal representative shall be delivered in writing to the Head Office or any branch office of the **Company**.

3. Eligibility

- (a) The **Insured Person** must be a Malaysian or Malaysian permanent resident, legitimate work permit holder, valid student pass holder or individual otherwise legally employed in Malaysia or legally residing in Malaysia, and his/her spouse and child/children who are legally residing in Malaysia during the **Period of Insurance**, and who is aged:
 - (i) from thirty (30) days up to sixty-five (65) years to be eligible for basic plan;
 - (ii) from thirty (30) days up to sixty-five (65) years to be eligible for Optional Rider 1;
 - (iii) from eighteen (18) years up to sixty-five (65) years to be eligible for Optional Rider 2.
- (b) Ages referred to in this **Policy** shall be in reference to the age as at the last birthday.

4. Purpose of Travel

The benefits provided under this **Policy** shall only apply to travel for leisure (holiday) or business purposes. The **Company** shall not be liable for any claim arising out of travel for purposes other than leisure or business.

Travel for business purposes includes travel to attend business meetings, seminars, talks or events relevant to the **Insured Person's** business/job and excludes any secondment, short or long-term

posting and any other similar activity.

5. Change of Address or Particulars

The **Insured Person** and/or the **Policyholder** shall give immediate written notice to the **Company** of any change in the name, residence, business or occupation of the **Insured Person** or the **Policyholder**, as the case may be. The **Insured Person** shall also give notice before any renewal of his or her coverage under this **Policy** of any **Injury** disease, physical defect or infirmity by which the **Insured Person** has become affected or has knowledge of.

6. Alterations

The **Company** reserves the right to amend the terms and conditions of this **Policy** and such alteration to this **Policy** shall only be valid if authorised by the **Company** and endorsed hereon. Any alteration shall take effect from the next renewal of this **Policy**.

7. Claims

(a) Notice of Claims

All claims must be given in writing to the **Company** within thirty (30) days upon return to **Insured Person's Home**.

The **Insured Person** shall produce for the **Company's** examination all relevant documents at such reasonable times and shall co-operate with the **Company** in all matters pertaining to any loss and/or claims. Failure to comply with this condition may prejudice **the Insured Person's** claim. Written notice of claim given by or on behalf of the **Insured Person** to the Head Office or any Branch Office of the **Company** in Malaysia or to any authorized agent of the **Company** shall be deemed notice to the **Company**.

The benefit for **Permanent Disablement** is only payable if the **Insured Person** furnishes the **Company** with a copy of the medical report issued by a Medical Practitioner confirming the **Permanent Disablement**.

(b) Proof of Loss

Written proof of loss, including but not limited to medical reports, original receipts, police report and such other proof as required to support the nature of the claim, must be furnished to the **Company** within ninety (90) days from the **Date of Accident**.

Failure to furnish such proof within the time required shall not invalidate nor reduce any claim if it was not reasonably possible to give proof within such time provided such proof is furnished as soon as possible and in no event, except in the absence of legal capacity, later than one (1) year from the time proof is otherwise required.

All documents and evidence must be provided at the expense of the **Insured Person** or the

person entitled to receive moneys through the **Insured Person**, as the case may be (“Claimant”), in the form and nature required by the **Company**.

8. Policy Renewal

This **Policy** is issued for two (2) years and may be renewed thereafter subject to the consent of the **Company**. However, the **Period of Insurance** will be based on the period selected by the **Insured Person** at time of purchase of the coverage and as declared to the **Company** by the **Policyholder**.

9. Insured Person’s Coverage

The insurance cover of the **Insured Person** under this **Policy** shall correspond with the **Period of Insurance** of this **Policy** as set out in the **Endorsement**. The **Insured Person’s Journey/Trip** must commence in Malaysia and the **Insured Person** must return to Malaysia within the **Period of Insurance**. The **Insured Person** is limited to one (1) coverage only under this **Policy** during a subsisting **Period of Insurance** and a fresh coverage may only be effected for such **Insured Person** after expiry of a prior **Period of Insurance**, subject to the terms and conditions herein.

10. Premium Payment

Table 3 – Premium Table

No. of Days	Domestic	Asia	Worldwide
	(RM)		
1	2.78 per day	45	80
2			
3		6	10
Each additional day			

Optional Rider 1 (Sports Activity)

No. of Days	Domestic	Asia	Worldwide
	(RM)		
1	1 per day	10	10
2			
3		2	2
Each additional day			

Optional Rider 2 (High Altitude Mountaineering)

Asia/Worldwide (per trip)
(RM)
450

*Optional Rider 2 is only available for insured aged 18 years – 65 years.

Premium Discount

No. of person per order*	Discount (%)
5 and above	5

*Order refers to a group of insured persons purchased the coverage under the same transaction.

The premium payable shall depend on the choice of travel destination and duration of cover selected by the **Insured Person** and is more particularly set out in Table 3 – Premium Table. The **Company's** acceptance of premium shall constitute its agreement to cover the **Insured Person**.

The **Policyholder** shall provide the **Company** the relevant details of the **Insured Person** that is to be covered under this **Policy**. Payment of premium in respect of this **Policy** shall be made by the **Insured Person**, in consideration of the coverage to be provided to the **Insured Person**.

If this condition is not complied with then the coverage for the relevant **Insured Person** whose premium has not been paid and received is automatically cancelled, and the **Company** shall be entitled to the pro rata premium for the period the **Company** was on risk for such **Insured Person**. Where the premium payable pursuant to this warranty is received by an authorised agent of the **Company**, the payment shall be deemed to be received by the **Company**.

11. Termination of Insurance

(a) Termination by the Policyholder or Insured Person

If the **Policyholder** gives notice to the **Company** to terminate this **Policy**, such termination shall become effective on the date the notice is received or on the date specified in such notice, whichever is the later. Notwithstanding the termination of this **Policy**, the individual coverage of the **Insured Person** under this **Policy** subsisting at the date of termination of this **Policy** shall continue to be in force until the expiry of the **Period of Insurance** and the premium paid for such coverage shall not be refunded.

The **Insured Person** or the **Insured Person's Parent** (where the **Insured Person** is below the age of eighteen (18)) may terminate the individual coverage of the **Insured Person** by giving notice to the **Policyholder** to terminate his/her individual coverage under this **Policy** provided always that the **Period of Insurance** has not commenced. Such termination shall become effective on the date the notice is received or on the date specified in such notice whichever is the later. In the event premium has been paid for any period beyond the date of termination, the **Insured Person** shall be entitled to a refund of the premium paid for the individual coverage under this **Policy**.

(b) Termination by the Company

In the event the **Company** terminates this **Policy** or any individual coverage under this **Policy**, as the case may be, pursuant to Condition 18 (Misstatement or Omission of Material Fact) or by order of regulatory or governmental authorities, the **Company** shall give its notice of

termination by registered post to the **Policyholder** or **Insured Person**, as the case maybe, at their respective last known correspondence address in Malaysia. Such termination shall become effective thirty (30) days following the date of such notice.

Notwithstanding the termination of this **Policy**, the individual coverage of the **Insured Person** subsisting at the date of termination of this **Policy** shall continue to be in force until expiry of the **Period of Insurance** and the premium paid for such coverage shall not be refunded.

(c) Automatic Termination of Individual Coverage

The individual coverage of the **Insured Person** shall lapse/terminate on the earlier of the following occurrences:

- (i) at mid-night (standard Malaysian time) on the last day of the **Period of Insurance** even if the **Insured Person** attains the age of sixty-six (66) years anytime during the **Period of Insurance**; or
- (ii) upon the death of the **Insured Person**.

12. Payment of Benefits

- (a) Payment of any benefits under this **Policy** is subject to the terms and conditions herein. All benefits payable under this **Policy** shall be payable to the **Insured Person** or any one of the **Insured Person's Parent** (where the **Insured Person** is below the age of eighteen (18), as the case may be.
- (b) Any benefit payable under this **Policy** in the event of **Insured Person 's** death shall be paid to the individual as may be instructed by the **Insured Person** in writing or to the **Insured Person's** legal personal representative if there is no such written instruction from the **Insured Person**.

13. Currency and Exchange Rates

All premiums shall be paid in Malaysian Ringgit. In the event that the **Insured Person** shall be admitted into a hospital and/or receive medical treatment outside Malaysia and render bills in a currency other than Malaysian Ringgit, the **Company** shall indemnify the **Insured Person** or his/her legal representative in Malaysian Ringgit based on the quoted exchange rate (open market rate if a free market, official rate if not a free market) at the date of the claim settlement.

For the avoidance of doubt, the **Insured Person** shall be responsible for any incidental costs incurred from transferring funds to a foreign bank account. These costs include, but are not limited to, transfer fees, currency conversion charges, and applicable taxes. These expenses shall not be covered by this **Policy**.

14. Applicable Law

This **Policy**, and all rights, obligations and liabilities arising hereunder, shall be construed and determined and may be enforced in accordance with the laws of Malaysia and the Malaysian Courts shall have exclusive jurisdiction hereto.

No action in law or in equity shall be brought under this **Policy** prior to expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this **Policy**.

15. Receipts

The receipt of the **Insured Person** or his/her personal legal representative, as the case may be, of any compensation payable herein shall in all cases be effectual discharge of liability of the **Company**.

16. Consent to Use Personal Data

(a) The **Policyholder** and/or **Insured Person** represents and warrants that if it submits information relating to the **Insured Persons** or other individuals to the **Company**, that it has the authority to provide information relating to such **Insured Persons** or other individuals, that it has informed the **Insured Person** or other individuals about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by the **Company**, and that the **Policyholder**, **Insured Person** or other individuals agree and consent that the **Company** may collect, use, disclose and process the personal information (whether obtained during the application process or administration of this **Policy**) in accordance with the **Company's** Privacy Notice as published from time to time at www.allianz.com.my.

(b) General Data Protection Regulation ("GDPR")

If any **Insured Person** wishes to exercise their GDPR rights, the **Policyholder** shall inform the **Insured Person** to write to the **Company** at privacy@allianz.com.my in order for the **Company** to assess and comply with the EU Privacy Law – GDPR.

17. Duty of Disclosure

(a) Consumer Insurance Contract

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if the **Policyholder** or the **Insured Person**, as the case may be, had applied for this insurance wholly for **purposes unrelated to the Policyholder or Insured Person's trade, business or profession**, the

Policyholder or **Insured Person** had a duty to take reasonable care not to make a misrepresentation in answering the questions in the proposal form and all the questions required by the **Company** fully and accurately and also disclose any other matter that the **Policyholder** or **Insured Person** knows to be relevant to the **Company's** decision in accepting the risks and determining the rates and terms to be applied, otherwise it may result in avoidance of contract, claim denied or reduced, terms changed or varied, or contract terminated. **This duty of disclosure continues until the time the contract was entered into, varied or renewed.**

(b) Non-Consumer Insurance Contract

Pursuant to Paragraph 4(1) of Schedule 9 of the Financial Services Act 2013, if the **Policyholder** or the **Insured Person**, as the case may be, had applied for this insurance for **purposes related to the Policyholder's or Insured Person's trade, business or profession**, the **Policyholder** or **Insured Person** had a duty to disclose any matter that the **Policyholder** or **Insured Person** knows to be relevant to the **Company's** 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 continues until the time the contract was entered into varied or renewed.**

(c) The **Policyholder** and **Insured Person** also have a duty to tell the **Company** immediately if at any time, after this **Policy** contract or coverage under this **Policy**, has been entered into, varied or renewed with the **Company**, any of the information given for this **Policy** or coverage under this **Policy** is inaccurate or has changed.

18. Misstatement or Omission of Material Fact

Subject to the relevant duty of disclosure of the **Policyholder** or **Insured Person**, as the case maybe, if any answer, disclosure or representation by the **Policyholder** or **Insured Person** in or to any proposal or declaration or query, has been deliberately or recklessly stated in any respect before this contract of insurance is entered into, varied or renewed, or if the **Policyholder** or **Insured Person** shall have failed to disclose any fact that the **Policyholder** or **Insured Person** knew to be relevant to the **Company's** decision on whether to accept this risk or not and on the rates and the terms to be applied, then, this **Policy** shall be void.

If any claim made by the **Insured Person** shall be fraudulent or exaggerated, or if any false declaration or statement shall be made in support of such claim, then the **Company** reserves the right to deny or reduce such claim or terminate the **Insured Person's** coverage, as the case may be.

19. Applicable Tax

In the event that any sales and services tax, value added tax or any similar tax and any other duties, taxes, levies or imposts (collectively "Applicable Tax") whatsoever are introduced by any authority and are payable under the laws of Malaysia in connection with any supply of goods and/or services made or deemed to be made under this **Policy**, the **Company** will be entitled to charge any Applicable Tax as allowed by the laws of Malaysia. Such Applicable Tax payable shall be paid in addition to the applicable premiums and other charges. All provisions in this **Policy** on payment of premiums and default hereof shall apply equally to the Applicable Tax.

20. Cash Before Cover

It is a fundamental and absolute special condition of this **Policy**, that the premium due must be paid and received by the **Policyholder** before cover commences. If this condition is not complied with, then the individual coverage under this **Policy** will be deemed cancelled from inception.

21. Sanction Notice Pursuant to Allianz Standards on Anti-Money Laundering, Countering Financing of Terrorism, Countering Proliferation Financing and Targeted Financial Sanctions

Company shall from time-to-time conduct sanction screening on the **Policyholder, Insured Person(s)** and any personal representatives, trustees, beneficiaries and other persons who are entitled to claim or receive any monies or benefits under this **Policy**, directly or indirectly, and any beneficial owner thereof. **Company** shall not be deemed to provide cover or be liable to refund any premium received, pay any claim or provide any benefit under this **Policy** to the extent that the provision of such cover, refund of premium, payment of such claim or provision of such benefit would expose **Company** or its personnel to any risk of or actual fine, punishment, sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of Malaysia, the European Union, United Kingdom or United States of America.

Part 3 – Exclusions

- (a) The **Company** will not pay for claims caused by or resulting from:-
- (i) War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power, martial law or state of siege or any of the events or causes which determine the proclamation or maintenance of martial law or state of siege, strike, riot or civil commotion, lockout or threat of such incident;
 - (ii) Lockdowns, quarantine, mandatory isolation, stay at home orders, changes in government alert levels or similar restrictions that apply generally or broadly (i) to some segment or all of a population, geographical area, building, or vessel or (ii)

- based on, to, from, or through where the person is travelling. This exclusion applies even if the order or directive specifically designates the **Insured Person** or **Insured Person's Travelling Companion** to be quarantined or to isolate, unless otherwise stated herein;
- (iii) Delay, confiscation, detention, requisition, damage, destruction or any prohibitive regulations by customs or other government officials or authorities of any country, including any general order, directive or advice not to travel issued in connection with or arising from Covid-19;
 - (iv) Ionising radiation or contamination by radioactivity, nuclear weapons and materials;
 - (v) The radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;
 - (vi) Loss of or damage to hired or leased equipment(s);
 - (vii) Offshore activities such as non-recreation diving, mining, oil-rigging, aerial photography or handling of explosives;
 - (viii) **Insured Person** engaging in any naval, military, air force, law enforcement or civil defense service or operation, overseas secondment as part of the **Insured Person's** occupation, **Insured Person** travelling abroad solely to work, manual work in connection with any trade, employment or profession during the **Journey/Trip**;
 - (ix) **Insured Person** engaging in aviation, other than as a fare-paying passenger;
 - (x) **Insured Person's** direct participation in any **Terrorism/Act of Terrorism**;
 - (xi) Loss due to currency exchanges of any and every description;
 - (xii) Services rendered without the **Company's** authorization and/or intervention;
 - (xiii) HIV (Human Immunodeficiency Virus) and/or any HIV-related illness including AIDS (Acquired Immune Deficiency Syndrome) however caused and/or any mutant derivations, variations or treatment thereof however caused;
 - (xiv) Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre;
 - (xv) **Insured Person** having received a terminal prognosis;
 - (xvi) **Insured Person** travelling against medical advice, or on medical advice where the trip is made solely for the purpose of obtaining treatment;
 - (xvii) **Insured Person's** failure to obtain the required vaccinations before departure;
 - (xviii) Any **Notifiable Disease** requiring isolation or quarantine by law, save for Covid-19 expressly referred to and covered under the following benefits: Medical Expenses, Hospital Income, Deposit or Trip Cancellation, Travel Curtailment;
 - (xix) **Insured Person's** suicide or attempted suicide, self-injury or willful exposure to peril (other than in an attempt to save human life), or the committing of any criminal acts;
 - (xx) **Insured Person** being under the influence of drugs or other substance abuse unless the drug is taken in accordance with an authorised medical prescription;
 - (xxi) **Insured Person's** alcohol content in the blood and/or urine samples exceeding the limit permitted by law of the country in which the **Injury** occurred;
 - (xxii) Any costs of treatment in respect of childbirth, miscarriage, or any complications to a pregnancy, unless caused solely and directly by an **Accident**;
 - (xxiii) **Pre-Existing Conditions**;
 - (xxiv) **Illness** or disorders of a psychological nature, mental and nervous disorders, including but not limited to insanity;

- (xxv) Riding/driving without a valid driving license (NOTE: this will not apply where the **Insured Person's** license has expired but the **Insured Person** is not disqualified from holding or obtaining such driving license under the regulations of the Malaysian Road Transport Department or any other relevant laws); and
 - (xxvi) **Insured Person** travelling against the orders or advice of any government or other public authority.
- (b) The **Company** will not pay for claims if the **Insured Person** purchased the coverage under this **Policy** and made payment of the premium after the **Insured Person** have suffered/discovered a loss that is covered under this **Policy**.
- (c) The **Company** will not pay for claims arising from the **Insured Person** being infected with Covid-19 if **Insured Person's** vaccination status in "MySejahtera" application is not "Fully Vaccinated" prior to the **Journey/Trip**.
- (d) The **Company** will not pay claims arising from:-
- (i) **Insured Person** participating in a **Hazardous Activity(ies)**, unless such sports is covered under the Additional Sports (Optional Rider) that the **Insured Person** have purchased;
 - (ii) **Insured Person** engaging in, practicing for, taking part in or training in any speed contest or racing, any professional competitions or sports or any sports in which the **Insured Person** would or could earn or receive remuneration, sponsorships, donations or any other form of financial rewards;
 - (iii) **Insured Person** participating in or training for any amateur sporting activities or competitions while on the **Journey/Trip**. This does not include participating in informal recreational sporting competitions and tournaments organised by accommodations, resorts or cruise lines to entertain their guests.

Part 4 – Definition

Accident means any sudden or unexpected event, resulting directly and independently from the action of an external cause, other than any intentionally self-inflicted **Injury**.

Alternative Medicine means alternative medical treatment which is carried out by an alternative **Medical Practitioner**, other than the **Insured Person**.

Company means Allianz General Insurance Company (Malaysia) Berhad (Company No. 200601015674 (735426-V)).

Common Carrier(s) means any land, sea or air carrier operated under a licence and provides regular scheduled transportation service for individuals who travel as a fare-paying passenger.

Date of Accident means the day when any **Injury** and other covered incident(s) occurs, is inflicted on, and/or contracted by the **Insured Person**.

Endorsement means a written alteration to the terms, conditions and limitations of this **Policy**.

Family Member means the **Insured Person's** selected one (1) legal spouse, parents, parents-in-law, grandparents, grandparents in-law, great grandparents, biological/legally adopted child/children, grandchildren, great grandchildren, siblings, brother-in-law or sister-in-law.

Geographical Area means the **Insured Person's** selected scheduled destination within Malaysia or the **Insured Person's** selected geographical travel area outside Malaysia indicated as "Asia" or "Worldwide" in the **Policy** schedule. The terms "Asia" and "Worldwide" are defined as follows:

- (a) Asia is defined as Singapore, Thailand, Indonesia, Philippines, Brunei, Taiwan, Korea, China including Hong Kong and Macau, Laos, Vietnam, Myanmar, Cambodia, India, Sri Lanka, Maldives, Bangladesh, Nepal, Australia, New Zealand and Japan;
- (b) Worldwide is defined as all countries including Asia (as defined above) except the Excluded Countries.

For the purposes of the definition of "Geographical Area", the term "Excluded Countries" include Israel, Iran, Syria, Belarus, Cuba, Democratic Republic of Congo, North Korea, Somalia, Sudan, South Sudan, Zimbabwe and all other sanctioned and war declared countries.

Hazardous Activity(ies) means mountaineering, abseiling or rock climbing, necessitating the use of ropes and other climbing equipment, paintball shooting, indoor climbing, flying or other aerial activities, racing (other than on foot), professional sporting activities and competitions of any kind, any organised sporting holiday and any other activities that requires a degree of skill and involves exposure to risk.

Home means the **Insured Person's** usual place of residence in Malaysia.

Hospitalisation means admission to a hospital as a registered inpatient for medically necessary treatments for an **Injury** upon recommendation of a **Medical Practitioner**. A patient shall not be considered as under **Hospitalisation** if the patient does not physically stay in the hospital for the whole period of confinement.

Illness means any sudden and unexpected deterioration of health certified by a Medical Practitioner including the Coronavirus Disease 2019 (Covid-19) provided always that the Covid-19 diagnoses is further supported with a copy of a medical report or lab report indicating a confirmed diagnosis of Covid-19.

Injury means bodily **Injury(ies)** caused solely and directly by an **Accident**.

Insured Person means the individual, as declared by the **Policyholder** and accepted for coverage by the **Company**.

Journey/Trip means the journey/trip commencing when the **Insured Person** departs from the **Insured Person's Home** or place of business in Malaysia to the place of embarkation to commence travel to the intended destination(s) which is within the scope of the **Geographical Area**, provided always that such journey/trip does not commence more than twenty-four (24) hours prior to the booked or scheduled departure time and ceases on whichever of the following:

- (i) upon arrival at the **Insured Person's** final destination in Malaysia;
- (ii) on the expiry of the **Period of Insurance** specified in the **Schedule**; whichever is earlier; or
- (iii) not more than twenty-four (24) hours after the **Insured Person's** arrival in Malaysia in the event the **Insured Person's** journey back to the **Insured Person's** intended final destination begins or continues after the immediate expiry of the **Insured Person's** the **Period of Insurance**.

The duration for each **Journey/Trip** shall not exceed thirty (30) consecutive days for travel within Malaysia and two hundred (200) consecutive days for travel outside Malaysia, from the commencement of the **Journey/Trip**.

Medical Practitioner means a registered medical practitioner licensed by the medical authorities of the country in which treatment is provided and who is practicing within the scope of his/her licensing and training but excluding a **Medical Practitioner** who is the **Insured Person** himself/herself.

Natural Disaster means major adverse event resulting from natural processes of the earth such as flood, tornado, hurricane, wild forest fire, volcanic eruption, earthquake, heat wave, tsunami, sandstorm or landslide.

Notifiable Disease means **Illness** or disease sustained by an **Insured Person** resulting from pandemic influenza and any other **Illness** (excluding Covid-19) or disease which has been declared as a pandemic or epidemic by order of the relevant government authorities or a recognized public health authority.

Parent means the biological parent, legal adoptive parent or legal guardian of the **Insured Person**, as the case may be.

Period of Insurance means the duration for when an **Insured Person** is insured as set out in the **Schedule**, subject to the terms and conditions and exclusion of this **Policy**.

Permanent Disablement means the conditions which are described under Table 2 - Scale of Compensation under Part 1 (A) (2).

Personal Effects means personal items belonging to the **Insured Person**, which are taken by the **Insured Person** on the **Journey/Trip** or acquired by the **Insured Person** during the **Journey/Trip**.

Personal Luggage means each of the **Insured Person's** suitcases or luggage of a similar nature and its contents and articles carried by the **Insured Person** during the **Journey/Trip**.

Policy means this **Policy** contract including the **Schedule** and all **Endorsements**.

Policyholder means a corporate body as described in the **Schedule** to whom this **Policy** has been issued in respect of cover for the **Insured Person**.

Pre-Existing Conditions means any condition for which treatment, medication, advice or diagnosis, consultation and/or prescribed drugs has been sought or received during the twelve (12) months prior to the commencement of the **Journey/Trip**.

Schedule means the document which is issued to the **Policyholder** by the **Company** detailing information such as the salient benefits provided under this **Policy**.

Sum Insured means the **Sum Insured** or the amount of benefit payable as stated in the **Schedule**.

Serious Illness means:

- (i) an illness (including Covid-19) which, if suffered, would result in the **Insured Person** being certified by a Medical Practitioner as unfit to travel or continue with the **Insured Person's Journey/Trip** and would require the **Insured Person** to receive treatment; or
- (ii) in respect of persons other than the **Insured Person**, an **Injury** or illness which is certified as being dangerous to life by a **Medical Practitioner**.

Smart Devices means an electronic device, such as smart phone, tablet, iPad, personal digital assistant (PDA), notebook computers or laptops and other similar items.

Terrorism/Act of Terrorism is an act, including the use of force or violence, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s), committed for political, religious or ideological purposes including the intention to influence any government and/or to put the civilian population in fear of such purposes.

Travelling Companion means an individual who is registered to travel on the same **Journey/Trip** with the **Insured Person**.

Checklist on the required supporting documents of Claims

Benefits	Documents
Personal Accident	<ol style="list-style-type: none"> 1. Duly completed e-payment form 2. Boarding pass or travel itinerary 3. Medical report or death certificate 4. Original medical bills/receipts
Medical related claims	<ol style="list-style-type: none"> 5. Hospital admission/discharge note or 6. Print Screen of vaccination status under the MySejahtera application 7. Covid-19 vaccination certificate 8. Copy of medical report or lab report indicating confirmed diagnosis of Covid-19

Deposit or Trip Cancellation	<ol style="list-style-type: none"> 1. Duly completed e-payment form 2. Boarding pass or travel itinerary 3. Cancellation invoice and refund due 4. Insured Person or Insured Person's Family Member's medical report/death certificate 5. Proof of relationship between the Insured Person and the Insured Person's family member e.g. birth certificate, marriage certificate
Trip Curtailment	<ol style="list-style-type: none"> 6. Original receipts of all amounts claimed 7. Print Screen of vaccination status under the MySejahtera application 8. Covid-19 vaccination certificate 9. Copy of medical report or lab report indicating confirmed diagnosis of Covid-19
Travel Delay	<ol style="list-style-type: none"> 1. Duly completed e-payment form 2. Boarding pass or travel itinerary 3. Written confirmation from Common Carrier regarding the period of delay (in number of hours), the actual date and time of departure and the reasons for such delay/missed departure/missed connection
Luggage Delay	
Personal Luggage or Personal Effects	<ol style="list-style-type: none"> 1. Duly completed e-payment form 2. Boarding pass or travel itinerary 3. Copy of report from relevant authority 4. Property irregularity report from Common Carrier on the delayed delivery of luggage 5. Written confirmation from the Common Carrier on the loss of luggage 6. Original receipts for items claimed
Natural Disaster at Destination	<ol style="list-style-type: none"> 1. Duly completed e-payment form 2. Original receipts for travel and accommodation paid 3. Copy of air ticket
Damage to Sports Equipment	<ol style="list-style-type: none"> 1. Duly completed e-payment form 2. Boarding pass or travel itinerary 3. Photographs of the damaged equipment 4. Original receipts of items claimed. If not available, provide description on items with the purchase date and price 5. If items sent for repair, original receipts for the cost of repair 6. Police report

The above list is not exhaustive. The **Company** reserves the right to request for any relevant document(s) as may be applicable and reasonable to support an **Insured Person's/Claimant's** claim at the **Insured Person's/Claimant's** expense.



Allianz General Insurance Company (Malaysia) Berhad 200601015674 (735426-V)
(Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia)

Important Notice

Policy Coverage and Premium Payment

It is a condition of this **Policy** that the premium due for the coverage under the **Policy** must be paid before cover commences. If this condition is not complied with, then the **Insured Person's** coverage under this **Policy** will be deemed cancelled from inception.

Lodging of Complaints

We are committed to maintaining high levels of service, honesty, integrity and trustworthiness. If you have any reason to be dissatisfied with any of our products or services, we would like to hear from you. Your feedback is very important to us as we are always looking for ways to improve and serve you better.

To provide us with your feedback, you may contact us via the following channels:

Write to:

Customer Feedback Center, Allianz Arena, Ground Floor, Block 2A, Plaza Sentral,
Jalan Stesen Sentral 5, Kuala Lumpur Sentral, 50470 Kuala Lumpur.



 1 300 22 5542  customer.service@allianz.com.my  allianz.com.my

Avenues to Seek Redress

You may submit your complaint to the Financial Markets Ombudsman Service (FMOS) if you are not satisfied with our final response or decision, and if your complaint is within the scope of the FMOS as well as a monetary limit of RM250,000.

FMOS can be contacted at the following address:

Financial Markets Ombudsman Service (Company No: 200401025885)
Level 14, Main Block, Menara Takaful Malaysia,
No. 4, Jalan Sultan Sulaiman, 50000 Kuala Lumpur.

 03 2272 2811  fmos.org.my




If your complaint does not fall within the purview of the FMOS, you may refer your complaint to Laman Informasi Nasihat dan Khidmat (LINK) of Bank Negara Malaysia (BNM) at the following:

Mailing Address:

BNMLINK
Bank Negara Malaysia
P.O. Box 10922
50929 Kuala Lumpur

BNMLINK Office:

4th Floor, Podium Bangunan AICB
No. 10, Jalan Dato' Onn
50480 Kuala Lumpur

 1 300 88 5465
03 2174 1717 (Overseas)  03 2174 1515 (Fax)  bnm.gov.my (Website)
bnm.gov.my/livechat (Live Chat)
bnmlink.bnm.gov.my (eLINK Form)

For physical visits, BNMLINK will receive visitors by appointment only. The public may request for an appointment through eLINK Form or by telephone.

You may check with our Customer Feedback Centre on the types of eligible complaints handled by FMOS or BNM before submitting your complaint.