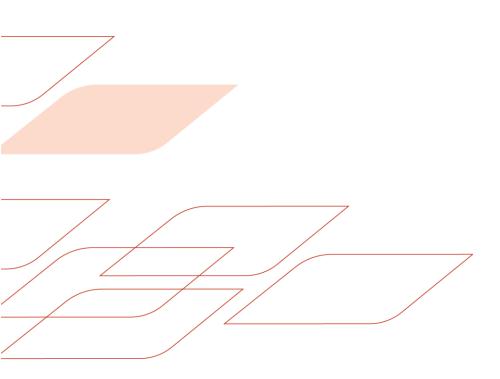


Generali Insurance Malaysia Berhad

(formerly known as AXA Affin General Insurance Berhad)

Reg No: 197501002042 (23820-W)

GREAT WALL PERSONAL ACCIDENT **INSURANCE POLICY**





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(formerly known as AXA Affin General Insurance Berhad)

Reg No: 197501002042 (23820-W)

GREAT WALL PERSONAL ACCIDENT **INSURANCE POLICY**

Note: You are requested to read this document carefully and keep it in a safe place. Please contact Us if You need any clarification.

Statement Pursuant to Schedule 9 of the Financial Services Act 2013

This Policy is issued in consideration of the payment of Premium as specified in the Policy Schedule and pursuant to the answers given in Your Proposal Form (or when You applied for this insurance) and any other disclosures made by You between the time of submission of Your Proposal Form (or when You applied for this insurance) and the time this contract is entered into. The answers and any other disclosures given by You shall form part of this contract of insurance between You and Us. However, in the event of any pre-contractual misrepresentation made in relation to Your answers or in any disclosures given by You, only the remedies in Schedule 9 of the Financial Services Act 2013 will apply.

This Policy reflects the terms and conditions of the contract of insurance as agreed between You and Us for the insurance hereinafter contained and has paid or agreed to pay the Premium in respect of such insurance.

Now this Policy witnesses that if the Insured during the Period of Insurance shall due to an accident sustain any Accidental Bodily Injury caused solely and directly by violent accidental external and visible means and being the sole and direct cause of Your death or Permanent Disablement, We will subject to the terms exceptions and conditions herein or endorsed hereon pay in accordance with Schedule 10 of Financial Services Act 2013 the provisions of this Policy the compensation specified in the Table of Benefit.

DEFINITION

"Accidental Bodily Injury" A bodily injury occurring during the Period of Insurance which is the direct result of accidental, external, violent and visible means and which solely and independently of any other cause results in a claim for death or disablement. This is extended to bodily injury as a result of exposure to the elements of natural perils. This does not include any sickness, disease, bacterial or viral infection, (unless this is the direct result of an Accidental Bodily Injury) naturally occurring condition or degenerative process or the result of any gradually operating cause.

"Act of Terrorism" means an act, including but not limited to the use of force or violence, by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization or government(s) which is committed for political, religious, ideological, or ethnic purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

"Capital Sum Insured" means the Original Capital Sum Insured plus renewal bonus accrued.

"Customary short-period rates" means the following:

Period Not Exceeding	Percentage of Annual Rate-Charged	Refund of Annual Premium
16 days to 2 months	20%	80%
2 months	40%	60%
3 months	50%	50%
4 months	60%	40%
5 months	70%	30%
6 months	75%	25%
7 months	100%	Nil

"Doctor" means a registered medical practitioner qualified and licensed to practice western medicine and who, in rendering such treatment is practising within the scope of his licensing and training in the geographical area of practice, but excluding a Doctor who is the Insured person himself.

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

"Hospital" shall mean only an establishment duly constituted and registered as a hospital for the care and treatment of sick and injured persons as paying bed-patients and which:-

- a) has facilities for diagnosis and major surgery;
- b) provides twenty four (24) hours a day nursing services by registered and graduate nurses;
- c) is under the supervision of a physician; and
- d) is not primarily a clinic; a place for alcoholics or drug addicts; a nursing, rest or convalescent home or a home for the aged or similar establishment.

"Loss" shall mean loss by physical severance or permanent total loss of use of the limb. In the case of sight, speech and hearing the permanent complete total irrevocable and incurable loss of the faculty. This loss must be certified by a **Doctor**.

"Medical Expenses" means the cost of medical surgical or other remedial attention, treatment or appliances given or prescribed by a Medical Doctor and all hospital nursing and ambulance charges which is Medically Necessary.

"Medically Necessary" means a medical service which is:-

- a) consistent with the diagnosis and customary medical treatment for a covered Disability, and
- in accordance with standards of good medical practice, consistent with current standard of professional medical care, and of proven medical benefits, and
- not for the convenience of the Insured or the **Doctor**, and unable to be reasonably rendered out of **Hospital** (if admitted as an inpatient), and
- d) not of an experimental, investigational or research nature, preventive or screening nature,
- e) for which the charges are fair and reasonable and customary for the Disability.

"Occurrence" means the exact period when the incident took place.

"Original Capital Sum Insured" means the Capital Sum Insured under item 1 as stated in the Schedule when Your policy was first incepted.

"Period of Insurance" means the period for which You are insured.

"Permanent Disablement" means permanent disablement of a member of the body, the details of which are stated in the Scale of Compensation and which disability lasts more than three hundred and sixty five (365) days following which there is no hope of improvement.

"Permanent Total Disablement" shall mean Permanent Disablement which

- a) continues for a period of three hundred and sixty-five (365) days, and
- b) is confirmed as total, continues and permanent by a **Doctor** after three hundred and sixty-five (365) days, and
- c) entirely prevents You from engaging in or giving attention to gainful occupation or any and every kind for the remainder of **Your** life.

"Policy" means Your insurance contract which consists of this Policy wording, Schedule and any Endorsement.

"Premium" means any amount We require You to pay under the Policy plus any additional taxes or charges imposed by the government in respect of the execution and delivery of this Policy.

"Public Conveyance" shall mean any land, water or air conveyance operated under a license for the transportation of passengers for hire but does not include any chartered flight.

"Schedule" means the Policy Schedule where the benefits and Sum Insured are stated.

"Snatch Theft /Robbery" means Your cash, valuable and belonging in Your possession is violently or by force taken away by an unknown person.

"Total and Permanent Disablement" means Total and Permanent Disablement from engaging in or attending to employment or occupations of any and every kind and Total and Permanent Loss, Permanent Loss of Use, Physical Severance.

"Total Paralysis" shall mean total and permanent loss of functional use of all four limbs and trunk arising solely and directly from the Bodily Injury, causing permanent damage to Your nervous system which shall completely and permanently prevent You from engaging in any occupation which You are capable by reason of education, training or experience, always provided that the disability must commence within six (6) months of the Accident, has continued for an uninterrupted period of 365 days, causes You to be bedridden and be certified to be so by a Doctor.

"You/Your/Insured Person/Policy owner" means each person named in the Policy must be Malaysian, Permanent Resident, Work Permit Holder, Pass Holder or otherwise legally employed in Malaysia and/or his/her legally **Spouse** and **Children**, all residents in Malaysia.

"Spouse" shall mean Your legal husband/wife who is not legally separated or divorced at the commencement of the Policy.

"Child" shall mean a fully dependent child under the age of 18 years or up to 23 years who is studying full-time in a recognised institution of higher learning. The child must be at least 30 days old.

INSURING AMOUNT AND BENEFITS

Item 1 and 2 (Death or Permanent Disablement)

We will pay the benefit(s) and the amount shown on Your Policy Schedule to You or to Your nominees or Administrator of Executors of Your estate if You suffer an Accidental Bodily Injury:

- a) During the Period of Insurance,
- b) Which results in death or Permanent Disablement within twelve (12) months of the injury from which a claim arises

On the happening of an **Accidental Bodily Injury** giving rise to a claim under Item 1 or 2 stated in the Scale of compensation or in Aggregate more than 100% of the benefits becomes payable, this **Policy** shall cease thereafter.

SCALE OF COMPENSATION

Item No.		Compensation % of Capital Sum Insured			
1.	Accidental Death	100%			
2.	Total and Permanent Disableme				
	employment or occupation (f) Loss of all sight in one eye (g) Loss of hearing in one ear (h) Loss of hearing in both ear (i) Loss of speech (j) Loss of thumb (k) Loss of Index finger (l) Loss of any finger (each) (m) Loss of metacarpals (n) Loss of great toe	ermanently bedridden nent from engaging in or attending to of any kind and every kind. - both phalanges - one phalanx - all phalanges - two phalanx - all phalanges - one phalanx - all phalanges - one phalanx - all phalanges - two phalanges - two phalanges - two phalanges - one phalanx - all phalanges - one phalanx - each - all phalanges - one phalanx	100% 100% 100% 100% 100% 50% 15% 75% 20% 20% 10% 10% 8% 5% 8% 5% 8% 5% 3% 3% 3% 5% 2%		
	(o) Loss of other toe	- all phalanges	3%		

Item 3 (Snatch Theft/Robbery Inconvenience Benefit)

In the event of a loss or damage to the **Insured Person**'s personal effects due to snatch theft or robbery, **We** will pay up to the amount or limit stated in the Table of Benefits subject to a police report being lodged. This benefit is payable for a maximum of two (2) occurrence during the **Period of Insurance**. A police report must be made within twenty four (24) hours of occurrence and submitted with **Your** claim.

Item 4 (Hospital Income)

On the happening of an **Accidental Bodily Injury** resulting in **Your** confinement in a **Hospital** for more than twelve (12) hours, **We** will pay **You** a daily allowance as specified in the **Table of Benefit**. This is subject to a maximum of one hundred and eighty (180) days. This benefit is payable provided that:-

- a) You were hospitalized within twenty one (21) days from the date of the accident
- b) Your hospitalization is for Medically Necessary treatment caused by the accident

Item 5 (Guardian Allowance)

If **Your Child** is hospitalised for more than twelve (12) hours as a result of accident and require **Your** full time attention and companion, **We** will pay **You** an allowance as specified in the Table of Benefit.

Item 6 (Home Tuition Benefit)

We will pay You the amount as specified in the Table of Benefit for allowance for tuition fees if Your Child is unable to attend school for two (2) weeks consecutively due to injury arising from an accident.

Item 7 (Hospitalisation Benefit)

In the event of **Your Child** hospitalisation exceeding 30 days or more as a result of accident, **We** will pay **You** a lump sum payment as specified in the Table of Benefit in respect of each accidental is payable upon discharge from **Hospital**.

EXCLUSIONS

We will not pay for any consequence whatsoever which is the direct or indirect result of any of the following:-

- 1. Whether or not such consequence has been contributed to by any cause or event:
 - (a) War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, mutiny or usurped power, military or popular uprising, any Act of Terrorism.
 - (b) Any action taken in controlling, preventing, suppressing, or in any way relating to (a) above.
- 2. Ionization, radiation or contamination by radioactivity from any nuclear waste from the combustion of nuclear fuel or nuclear weapons materials.
- Your suicide, attempted suicide or self inflicted injury, regardless of Your state of mind at the time the incident occurred, or insanity.
- 4. Medical or surgical procedure unless the procedure was a necessity following an Accidental Bodily Injury.
- Any form of disease including but not limited to HIV (Human Immunodeficiency Virus Infection) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) or ARC (AIDS Related Complex) however caused.
- 6. Any form of parasitic infection.
- 7. Childbirth, miscarriage, pregnancy or any related complication.
- 8. Pre-existing physical or mental defect or infirmity.
- 9. Provoked murder or assault.
- 10. Flying, other than while travelling as a fare-paying passenger on a licensed aircraft.
- 11. While committing or attempting to commit any unlawful act, participation in, attempt at, or acting as an accessory to, any crime which involves deliberate criminal intent or action.
- 12. The influence of, or due wholly or partly to the effect of alcohol or drugs (other than drugs taken in accordance with the treatment prescribed and directed by a **Doctor** but excluding drugs used in the treatment of drug addiction.
- 13. Naval, Air Force or Military service or operations.
- 14. Your active participation in any strike, riot or civil commotion.
- 15. You riding on any two (2) wheeled motorized vehicle 16.
- 16. You are engaged in tree felling, sawing or transportation of logs or timber and using woodworking machinery.
- 17. **You** engaged in any professional sports activities, aerial activities including parachuting and hand gliding, speed contest using boat or motorized vehicle, boxing, wrestling, martial arts and speed trials.
- 18. Mountaineering using ropes or guide and underwater activities involving the use of breathing apparatus at depth exceeding fifty (50) meters.

CONDITIONS

1. A duty to comply with the Condition

We will only be liable to make any payment under this **Policy** if **You** have at all times complied with the terms, provisions, conditions and **Endorsement** of this **Policy**.

2. Fraud

If any claim is fraudulent or of any fraudulent means, including inflating or exaggerating of the claim or submission of forged or falsified documents, are used to obtain benefits by **You** or anyone acting on **Your** behalf, all benefits under the **Policy** shall be forfeited

3. Claims Notification, Procedure and Settlement

- a) Written notice of any event likely to give rise to a claim should be submitted to **Us** as soon as reasonably possible and in any case not later than fourteen (14) days of the accident causing such injury.
- (b) You shall procure and act upon medical or surgical advice as soon as practicable.
- (c) You may be required, at Our expense to undergo further medical examination.
- (d) **We** will only pay the benefits if any medical certificates and other evidence which **We** may require are provided on request at Your expenses.
- (e) On payment of the benefits, for which once **You** give **Us** a receipt or discharge, **Our** liability in that respect will reduce by the sum paid or cease if full benefits have been paid.
- (f) We reserve the right to repudiate a claim where We are not satisfied with the evidence available to validate either:
 - (i) Your identity or
 - (ii) The circumstance of the loss.
- (g) In the event of **Accidental Bodily Injury** resulting in death, **We** shall be entitled to have a post-mortem examination at **Our** expenses.

4 Nomination

The person(s) nominated by a Policy Owner to receive death benefit payable under this Policy.

- (i) Pursuant to Paragraph 5(1) of Schedule 10 of the Financial Services Act 2013, a nomination made by a non-Muslim **Policy Owner** shall create a trust in favour of the nominee of the policy moneys i.e. death benefit payable upon the death of the Policy Owner, if:
 - (a) the nominee is his/her **Spouse** or **Child**; or
 - (b) the nominee is his/her parent (if there is no **Spouse** or **Child** living at the time of making the nomination).
- (ii) A nominee of a Muslim **Policy Owner** upon receipt of the policy moneys shall distribute the policy moneys in accordance with Islamic law.

5. Cancellation

- a) You have the right to cancel this **Policy** at any time by giving written notice to **Us**. You are entitled to a refund of **Premium** after **We** retain its **Customary Short Period Rates**.
- b) We may at any time cancel this **Policy** by sending fourteen (14) days notice in writing to **Your** last known address and will refund the pro rata premium equal to the unexpired **Period of Insurance**.
- c) Cancellation refund is not applicable if there are claims under the **Policy** for item 1 and 2 as per Table of Benefit.

6 Payment of Premium - Cash Before Cover

You must pay the premium before the coverage under this Policy is effective.

Disappearance

If, after **We** have examined all available evidence, **We** are satisfied that the disappearance of **You** can be presumed to be due to **Your** death as the result of an **Accidental Bodily Injury**, **We** will pay the accidental death benefit. If at any time after **We** have paid the benefit, **You** are found to be living, the payment must be refunded to **Us**.

8. Territorial Limit

This Policy provides cover on 24 hours worldwide basis.

9. Residence or Travel Overseas

No benefit or coverage whatsoever shall be allowed if the **Insured Person** resides or travel outside Malaysia for more than one hundred and eighty (180) consecutive days.

Age Limits

On the first effective date of this **Policy**, **You/Spouse** must be between eighteen (18) to sixty five (65) years old. **Policy** is renewable up to seventy (70) years old, which **Policy** will expire on the date of **Your** 70th birthday.

11. Arbitration Clause

All differences arising out of this **Policy** shall be referred to the decision of a Arbitrator to be appointed in writing by the parties in difference or if they cannot agree upon a single Arbitrator to the decision of two Arbitrators one to be appointed in writing by each of the parties within one calendar month after having been required to do so by either of the parties or in case the Arbitrators do not agree of an Umpire appointed in writing by the Arbitrators before entering upon the reference. The Umpire shall sit with the Arbitrators and preside at their meeting and the making of an Award shall be a condition precedent to any right of action against **Us**.

If **We** shall disclaim liability to **You** for any claim hereunder and such claim shall not within twelve (12) months from the date of such disclaimer have been referred to arbitration under the provisions herein contained then the claim for all intents and purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

12. Renewal Bonus

On **Your** renewal for the second (2nd) year of **Your Policy**, the **Original Capital Sum Insured** for item 1 and 2 as per Table of Benefit will be increased by fifty (50%) percent provided that no claims were lodged for the first (1st) year of insurance.

On renewal for the third (3rd) year and beyond, no renewal bonus will be extended.

In the event of any claim during the **Period of Insurance**, the renewal bonus will be nullified and upon renewal **Your Capital Sum Insured** will revert to the Original Sum Insured.

13. Cooling-off Period

After this **Policy** has been issued and for any reason whatsoever You shall decide not to take up the insurance and provided no claims has been made, **You** may notify **Us** within thirty (30) days after the effective date of this **Policy**. **You** will be entitled to the full premium refund.

14. Communication

All communication to **Us** must be in writing. **Endorsement** to this **Policy** contract must be issued and signed by **Us**.

15. Duty of Disclosure during this Insurance

- (i) Where **You** have applied 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 the Proposal Form (or when **You** applied for this insurance) i.e. **You** should have answered the questions fully and accurately. Failure to have taken reasonable care in answering the questions 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 in accordance with the remedies in Schedule 9 of the Financial Services Act 2013. **You** are also required to 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.
- (ii) 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 the Proposal Form (or when You applied for this insurance) is inaccurate or has changed.
- (iii) If **You** do not fully and faithfully provide this information, the insurance may not be valid or the **Policy** may not cover **You** fully.

16. Duty of Disclosure during this Insurance

During this Insurance You are required to immediately inform Us of any changes in Your occupation, work duties, sporting activities or any relevant information that may increase the risk.

We may:

- (i) require You to pay an additional Premium for the increase risk or
- (ii) make changes to the terms and conditions of this Policy or
- (iii) leave the **Policy** terms, conditions and premium unaltered.

You will only be covered for any increased risk if agreed in writing by Us.

17. Renewal

A new proposal form will be enclosed with the Renewal Notice for Your completion.

18. Government Tax Clause

You agree to pay and to hold harmless Us for any taxes or other government charges (however denominated) imposed by the government with respect to the execution or delivery of this Policy.

EXTENSIONS

Disappearance Clause

We shall pay the death compensation if during the **Period of Insurance** the Insured disappears following an accident involving aircraft or at sea or in a natural calamity and **Insured Person**'s body is not found within one year (1) after its disappearance and sufficient evidence is produced satisfactory to **Us** that leads **Us** inevitably to the conclusion that **You** died as a result of an event within the scope of this **Policy**.

Exposure Clause

It is hereby declared and agreed that in the event of the **Insured Person** after having sustained **Accidental Bodily Injury** arising from events insured hereunder be exposed to the elements of nature resulting in death, **We** shall agree to compensate the **Insured Person** subject to the terms, limitations, conditions and exclusions.

It is further declared and agreed that in the event of such claims for compensation a properly constituted judicial body of enquiry shall affirm that **You** have died of exposure after having sustained **Accidental Bodily Injury** arising from an insured event.

Duty of Disclosure

Where **You** have applied for this Insurance wholly for purposes unrelated to **Your** trade, business or profession, **You** had a duty to take reasonable care not to make a misrepresentation in answering the questions in the Proposal Form (or when **You** applied for this insurance) i.e. **You** should have answered the questions fully and accurately. Failure to have taken reasonable care in answering the questions 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 in accordance with the remedies in Schedule 9 of the Financial Services Act 2013. **You** were also required to disclose any other matter that **You** knew to be relevant to **Our** decision in accepting the risks and determining the rates and terms to be applied.

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 the Proposal Form (or when **You** applied for this insurance) is inaccurate or has changed.

Water Sport Clause

This **Policy** is extended to cover **You** against death or **Permanent Disablement** whilst engaged in water sports like water skiing, water polo, yachting, motorized water vehicles and including scuba diving at depth not exceeding fifty (50) meters provided that **You** are participation as an amateur.

Mountaineering Clause

This **Policy** is extended to cover **You** against death or **Permanent Disablement** whilst taking part in mountaineering activities not involving the use of ropes and guide.

Prescribed Drug Extension

This **Policy** is extended to cover **You** against death in the event of intoxication by drugs prescribed by a registered medical practitioner.

Winter Sports Extension

This Policy is extended to cover You against death or Permanent Disablement whilst engaged in winter sport as an amateur.

Amateur Sports Extension

This Policy is extended to cover You against death or Permanent Disablement whilst engaged in any sport activities as an amateur.

Insects & Snakes Bites Clause

This **Policy** is extended to cover **You** against death or **Permanent Disablement** sustained due to harmful insect bites and/or snake bites but excluding illness disease transmitted by such insect & snake.

Unprovoked Murder, Assault or Any Attempt Threat Clause

This **Policy** is extended You against death or **Permanent Disablement** arising out of Murder, Assault or any attempt threat but in no event shall this extension be operative if it is provoked by You.

Hijacking Extension

This **Policy** is hereby extended to cover **You** against death or **Permanent Disablement** arising from hijacking of any **Public Conveyance** in which **You** are travelling as a fare-paying passenger.

Hunting Clause

This **Policy** is extended to cover **You** against death or **Permanent Disablement** whilst participating in or involving in Hunting. Provided always that **You** are not engaged in any form of competition or exhibition or demonstration.

Accidental Gas Inhalation, Suffocation, Drowning & Drink And Food Poisoning Clause

This **Policy** is extended to cover **You** against death or **Permanent Disablement** arising from Accidental Gas Inhalation, Suffocation, Drowning, Drink and Food Poisoning and other similar misfortune with or without any sign of external or violent visible injury.

Natural Disaster Extension

This **Policy** is extended to cover **You** against death or **Permanent Disablement** arising from natural disasters such as earthquake, hurricane, flood, tsunami, volcanic eruption and other natural elements.

Strike, Riot And Civil Commotion Clause

This **Policy** is extended to cover **You** against death or **Permanent Disablement** arising from strike, riot and civil commotion. Provided **You** are not actively participating in such strike, riot and civil commotion.

Polo Playing Extension

This **Policy** is extended to cover **You** from death or **Permanent Disablement** whilst engaged in polo playing as an amateur. Provided always that **You** are not in engaged in any form of competition or exhibition or demonstration.

Animal Attacks Extension

This **Policy** is extended to cover **You** from death or **Permanent Disablement** sustained due to animal attacks. Provided always that **You** are not engaged in a profession working with animals.

Unscheduled Flight Extension

This **Policy** is extended to cover **You** from death or **Permanent Disablement** sustained whilst traveling on an unscheduled flight except for helicopters.

Motorcycling Extension

This **Policy** is extended to cover **You** from death or **Permanent Disablement** sustained as a rider or pillion rider on any two (2) wheeled motorized vehicle.

TABLE OF BENEFITS

TAI	TABLE OF BENEFITS (YOU/SPOUSE)								
Sum Insured (RM) / Plan									
Benefits		Plan 1		Plan 2		Plan 3		Plan 4	
		Year 1	Year 2	Year 1	Year 2	Year 1	Year 2	Year 1	Year 2
1.	Accidental Death	200,000	300,000	400,000	600,000	500,000	750,000	1,000,000	1,500,000
2.	Permanent Disablement	200,000	300,000	400,000	600,000	500,000	750,000	1,000,000	1,500,000
3.	Snatch Theft / Robbery Inconvenience	1,000	1,000	1,500	1,500	2,000	2,000	2,500	2,500
4.	Hospital Income (per day up to 180 days)	125	125	150	150	175	175	200	200

TABLE OF BENEFITS (CHILDREN)									
	Sum Insured (RM) / Plan								
	Benefits	Pla	n 1	Pla	ın 2	Pla	n 3	PI	an 4
		Year 1	Year 2						
1.	Accidental Death	100,000	100,000	100,000	100,000	100,000	100,000	100,000	100,000
2.	Permanent Disablement	100,000	100,000	100,000	100,000	100,000	100,000	100,000	100,000
5.	Guardian Allowance (per day up to 60 days)	50	50	100	100	150	150	200	200
6.	Home Tuition	500	500	500	500	500	500	500	500
7.	Hospitalisation Allowance	1,000	1,000	2,000	2,000	3,000	3,000	5,000	5,000

PRIVACY NOTICE

Dear Customers.

This privacy notice for personal data ("**Privacy Notice**") is issued to all customers of Generali Insurance Malaysia Berhad (which includes all its related and/or associated companies) ("**Company**", "we", "us" or "our"), pursuant to the statutory requirements of the Personal Data Protection Act 2010 ("**PDPA**").

During your course of dealings with us, we will collect and process your personal data for purposes, including, to communicate with you, provide products and/or services to you, administer and give effect to your commercial transactions with us, respond to your enquiries or complaints, provide you with information and/or updates on products, services and/or promotions offered by us and selected third parties, identify you (including publishing your name and photograph) when you become a winner in a contest or competition and/or participate in any events/activities organized by us and other purposes required to operate and maintain our business as set out in our Privacy Policy (collectively referred to as "Purposes").

We will not disclose any of your personal data to any third party without your consent except to the Company's group of companies (including the Company's related and/or associated companies), our professional advisers, vendors, suppliers, agents, contractors, service providers, business partners, insurance companies, banks and/or financial institutions, within or outside Malaysia, where necessary, for the Purposes mentioned above, to any party who undertakes to keep your personal data confidential, to any person as set out in our Privacy Policy, or to whom we are compelled or required under the law to disclose to. A copy of our Privacy Policy is available on our website at https://generali.com.my

It is necessary for us to collect and process your personal data. If you do not provide us with your personal data, or do not consent to this Privacy Notice, we will not be able to effectively provide products and/or services to you or process your personal data for any of the Purposes, if at all.

We are committed to ensuring that your personal data is stored securely. You have the right to request for access to, request for a copy of and request to update or correct, your personal data held by us. You also have the right at any time to request us to limit the processing and use of your personal data (for example, requesting us to stop sending you any marketing and promotional materials or contacting you for marketing purposes), subject to our right to rely on any statutory exemptions and/or exceptions to collect, use and disclose your personal data.

Your written requests or queries should be addressed to:	For data access requests, please direct your request to the following address:				
Manager, Customer Service Department Generali Insurance Malaysia Berhad 8th Floor, Menara Multi-Purpose, Capital Square, 8, Jalan Munshi Abdullah, 50100 Kuala Lumpur. Tel: +603 2034 9888 Email: info@generali.com.my	Legal and Compliance Department Generali Insurance Malaysia Berhad 8th Floor, Menara Multi-Purpose, Capital Square, 8, Jalan Munshi Abdullah, 50100 Kuala Lumpur. Tel: +603 2034 9888 Email: lcd_pdpa@generali.com.my				

By providing your personal data to us, you consent to us processing your personal data in accordance with this Privacy Notice, and you confirm that all personal data provided by you is accurate and complete, and that none of it is misleading or out of date. You will promptly update us in the event of any change to your personal data.

To the extent that you have provided (or will provide) personal data about your family members, spouse, other dependents (if you are an individual), directors, shareholders, employees, representatives, agents (if you are a corporate entity/an organization) and/or other individuals, you confirm that you have explained (or will explain) to them that their personal data will be provided to, and processed by, us and you represent and warrant that you have obtained their consent to the processing (including disclosure and transfer) of their personal data in accordance with this Privacy Notice.

In respect of minors (i.e. individuals under 18 years of age) or individuals not legally competent to give consent, you confirm that you are the parent or guardian or person who has parental responsibility over them or the person appointed by court to manage their affairs or that they have appointed you to act for them, to consent on their behalf to the processing (including disclosure and transfer) of their personal data in accordance with this Privacy Notice.

We reserve the right to update and amend this Privacy Notice or our Privacy Policy from time to time. We will notify you of any amendments to this Privacy Notice or our Privacy Policy via announcements on our website or other appropriate means. If we amend this Privacy Notice or our Privacy Policy, the amendment will only apply to personal data collected after we have posted the revised Privacy Notice or Privacy Policy.

In accordance with Section 7(3) of the PDPA, this Privacy Notice is issued in both English and Bahasa Malaysia. In the event of any inconsistencies or discrepancies between the English version and the Bahasa Malaysia version, the English version shall prevail.

NOTIS PRIVASI

Kepada Pelanggan-Pelanggan,

Notis privasi untuk data peribadi ini ("Notis Privasi") diberikan kepada semua pelanggan Generali Insurance Malaysia Berhad (termasuk semua syarikat berkaitan dan/atau syarikat bersekutu) ("Syarikat", "kita" atau "kami"), selaras dengan obligasi statutori di bawah Akta Perlindungan Data Peribadi 2010 ("PDPA").

Sepanjang masa urusan anda dengan kami, kami akan mengumpul dan memproses data peribadi anda untuk tujuan berkomunikasi dengan anda, memberi produk dan/atau perkhidmatan kepada anda, mentadbir dan memberi kesan kepada transaksi komersial anda dengan kami, memberi maklum balas terhadap pertanyaan atau aduan anda, memberi anda maklumat terkini mengenai produk, perkhidmatan dan/atau promosi yang ditawarkan oleh kami dan pihak ketiga yang terpilih, mengenal pasti anda (termasuk menyiarkan nama dan gambar anda) sekiranya anda menang dalam peraduan atau pertandingan dan/atau semasa anda menyertai acara/aktiviti yang dianjurkan oleh kami, serta tujuan-tujuan lain yang kami perlukan untuk mengendalikan dan mengekalkan perniagaan kami sepertimana yang tertera dalam Polisi Privasi kami (secara kolektifnya dirujuk sebagai "Tujuan-Tujuan").

Kami tidak akan mendedahkan apa-apa data peribadi anda kepada mana-mana pihak ketiga tanpa kebenaran anda kecuali kepada syarikat-syarikat di dalam kumpulan Syarikat (termasuk syarikat berkaitan dan/atau syarikat bersekutu kami), penasihat profesional, ejen, vendor, pembekal, kontraktor, pembekal perkhidmatan, rakan kongsi perniagaan, syarikat insurans, bank dan/atau institusi kewangan, di dalam atau di luar Malaysia, jikalau perlu, bagi Tujuan-Tujuan yang disebut di atas, kepada mana-mana pihak yang berjanji untuk menyimpan data peribadi anda secara sulit, kepada mana-mana pihak sepertimana yang tertera dalam Polisi Privasi kami, atau sekiranya diperlukan di bawah undang-undang. Sesalinan Polisi Privasi kami boleh didapati di laman web kami di https://generali.com.my

Kami perlu mengumpul dan menyimpan data peribadi anda. Sekiranya anda tidak memberikan data peribadi anda kepada kami, atau tidak bersetuju dengan Notis Privasi ini, kami mungkin tidak dapat memberikan produk dan/atau perkhidmatan secara efektif kepada anda atau memproses data peribadi anda bagi Tujuan-Tujuan yang disebut di atas.

Kami akan memastikan data peribadi anda disimpan dengan selamat. Anda mempunyai hak untuk meminta akses kepada, mendapat salinan, mengemaskini atau memperbetulkan data peribadi anda yang disimpan oleh kami. Anda juga mempunyai hak untuk meminta kami menghadkan pemprosesan dan penggunaan data peribadi anda pada bila-bila masa (contohnya, meminta kami berhentikan penghantaran iklan atau promosi kepada anda untuk tujuan pemasaran). Walaubagaimana pun, kami mempunyai hak untuk bergantung kepada mana-mana pengecualian dalam mengumpul, mengguna dan mendedah data peribadi anda.

Permintaan atau pertanyaan bertulis anda perlu disampaikan ke alamat di bawah:	Permintaan berkenaan akses data peribadi anda perlu disampaikan ke alamat di bawah:
Pengurus, Jabatan Khidmat Pelanggan Generali Insurance Malaysia Berhad 8th Floor, Menara Multi-Purpose, Capital Square, 8, Jalan Munshi Abdullah, 50100 Kuala Lumpur. Tel.: +603 2034 9888 Emel: info@generali.com.my	Jabatan Perundangan dan Pematuhan Generali Insurance Malaysia Berhad 8th Floor, Menara Multi-Purpose, Capital Square, 8, Jalan Munshi Abdullah, 50100 Kuala Lumpur. Tel.: +603 2034 9888 Emel: lcd_pdpa@generali.com.my

Dengan memberikan data peribadi anda kepada kami, anda bersetuju untuk kami memproses data peribadi anda sepertimana yang tertera dalam Notis Privasi ini, dan anda mengesahkan bahawa semua data peribadi yang diberikan oleh anda adalah betul dan lengkap, dan tiada data peribadi yang mengelirukan atau yang belum dikemaskinikan. Anda mesti, dengan segera, mengemaskini data peribadi anda sekiranya terdapat apa-apa perubahan kepada data peribadi yang anda beri kepada kami.

Setakat mana yang anda telah memberikan (atau akan memberikan) data peribadi tentang ahli keluarga, pasangan, tanggungan anda (jikalau anda ialah seorang individu), pengarah, pemegang saham, wakil, ejen (jikalau anda ialah sebuah entiti korporat/organisasi) dan/atau individu lain, anda mengesahkan bahawa anda telah menjelaskan (atau akan menjelaskan) kepada mereka bahawa data peribadi mereka akan didedahkan kepada, dan akan diproses oleh, kami dan anda menyata dan menjamin bahawa anda telah diberi kuasa untuk mendedahkan data peribadi mereka kepada kami dan anda telah memperolehi persetujuan daripada mereka berkenaan dengan pemprosesan (termasuk pendedahan dan pemindahan) data peribadi mereka sepertimana yang tertera dalam Notis Privasi ini.

Berkenaan dengan individu yang belum mencapai usia dewasa (iaitu individu di bawah umur 18 tahun) atau individu yang tidak mempunyai kompeten untuk memberi persetujuan, anda mengesahkan bahawa anda ialah ibu bapa atau penjaga atau orang yang mempunyai kewajipan terhadap mereka atau orang yang dilantik oleh mahkamah untuk menguruskan urusan mereka atau mereka telah melantik anda untuk mewakili mereka, untuk memberi persetujuan bagi pihak mereka berkenaan dengan pemprosesan (termasuk pendedahan dan pemindahan) data peribadi mereka sepertimana yang tertera dalam Notis Privasi ini.

Kami berhak untuk mengemaskini dan meminda Notis Privasi ini atau Polisi Privasi kami dari semasa ke semasa. Sebarang perubahan atau pemindahan kepada Notis Privasi ini atau Polisi Privasi kami akan dimaklumkan melalui pengumuman di laman web kami atau melalui cara yang bersesuaian. Jika kami meminda Notis Privasi ini atau Polisi Privasi kami, pindaan itu hanya akan berkuat-kuasa untuk data peribadi yang dikumpul selepas kami memaparkan Notis Privasi atau Polisi Privasi kami yang terpinda.

Mengikut Seksyen 7(3) PDPA, Notis Privasi ini diterbitkan dalam Bahasa Inggeris dan Bahasa Malaysia. Sekiranya terdapat sebarang ketidakseragaman atau percanggahan di antara versi Bahasa Inggeris dan Bahasa Malaysia, versi Bahasa Inggeris akan digunapakai.

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