

TYPE OF CONSTRUCTION CLASS

Construction Class (1A) & (1B)

Wall Wholly Brick / Concrete
 Brick / Concrete + Zinc / Asbestos
 Others (Please Specify)

Roof Tiles / Concrete / Metal / Asbestos
 Others (Please Specify)

Please specify your choice of plan:

BisPro Plan **A** **B** **C** **D** **E**

Description of Interest To Be Insured	Sum Insured (RM)
Section 1	
1. Building	RM
2. Stock-in-trade consisting of	RM
3. Others (please specify) _____	RM
Section 2	
1. Office Equipment, Computers and Peripherals, Furniture and Fittings	RM
Others (E.g.: machinery / equipment, consequential loss – separate quotation required)	RM
Total :	RM

GENERAL QUESTIONS (All questions must be answered. Please tick (✓) where applicable.)

- Is there any hazardous trade carried on or near the premises or any other circumstances increasing the risk you now wish to insure against? If yes, please give full particulars.

 Yes [] No []
- Is the premise equipped with an intruder alarm system? If "Yes", please state the type and make, types of detecting devices and whether the system is connected to a Central Monitoring System (CMS).

 Yes [] No []
- Do you keep a separate record of cash in locked safe and record of stocks and sales books? If "No", please give full particulars how records are kept?

 Yes [] No []
- In respect of the risks you wish to insure against, have you ever sustained any loss during the past five (5) years? If "Yes" please state details.

 Yes [] No []

5. Is there any insurance in force covering any of the property to be insured against with this or any other insurance company? If "Yes", please state the total Sum Insured, Policy Number and Name of Insurance Company. Yes [] No []

6. Has the insurance now proposed been declined, cancelled, refused renewal or subjected to special terms or increased premium by any other insurance company? If "Yes", please state the details. Yes [] No []

Is the fire insurance taken under UOB LIPS (Loans Insurance Processing System)? Yes [] No []

Payment Method : Cheque

Cheque to be made payable to Liberty Insurance Berhad.

DECLARATION

I/We hereby declare that I/We have fully and accurately answered all the questions above and matters which are relevant to the consideration of my/our proposal have been disclosed. I/We understand that non disclosure or misrepresentation of a material fact will entitle you to avoid this policy and agree that this proposal form and all written information which is provided are incorporated in and form the basis of any contract of insurance.

Signature of Proposer

Name

NRIC No.

Date

FOR OFFICE USE

Gross Premium :

6% Goods & Services Tax / GST :

Stamp duty : RM 10.00

Grand Total :

*** PREMIUM WARRANTY:**

The policy is subject to premium warranty which warrants that premium must be paid to insurance company within 60 days from date of effective cover, failing which the policy will be cancelled and the insurance company will be entitled to pro-rata premium.

MARKETING AND CONSENT TO TRANSFER ABROAD

Liberty Insurance Berhad strives to introduce new products and improve services in your best interests. The Personal data may be used by the Liberty Insurance Berhad and their agents, parent company and/or affiliates (within its financial group) to keep you informed by email, telephone, post or by such other means, of services and/or products and would like to know the best way to keep in touch with you.

YES, I wish to be contacted via :

E-mail Telephone Post

No, I do not wish to be contacted for such purpose.

In certain cases, Liberty Insurance Berhad may also share limited personal data with third parties outside its financial group for marketing purposes and may also transfer abroad the personal data to entities outside Malaysia who may act on behalf of Liberty Insurance Bhd and /or any member of the Liberty Mutual Group of Companies provided always that you have expressly consented to our doing so. Please indicate below if you consent to such disclosure.

I agree to Liberty Insurance Berhad disclosing my information to third parties outside its financial group for marketing purposes and to the transfer abroad of my personal data.

Yes No

ACKNOWLEDGEMENT AND CONSENT

I hereby confirm that I have read, understood and agree to be bound by the terms of the Liberty Insurance Berhad Privacy Notice (which is available at www.libertyinsurance.com.my or has been made available to me) and consent to the processing of my Personal data as described in the Liberty Insurance Berhad Privacy Notice and this Proposal Form.

Full Name : _____ Signature : _____
Date : _____ NRIC : _____

FOR OFFICE USE ONLY – VERIFICATION OF IDENTITY

In compliance with Section 66(B) and 66(D) of the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001

I hereby declare that the Proposer's detail had been verified against the following original documents:

Please tick (√) as appropriate.

National Registration Identity Card (NRIC) Passport.
 Certificate of Registration. Others (please specify) _____

Full name : _____ Signature : _____
Date : _____ NRIC Number : _____

IMPORTANT NOTE (1)

- The following persons are authorised to verify the above details
 - Staff of Liberty Insurance Berhad as authorized by the Company
 - Registered agents of Liberty Insurance Berhad
- Copies of documents verified for the following insurance policies must be retained
 - Policies with premiums exceeding RM50,000 per annum in respect of single policies issued to individuals institutions.
 - Policies with premiums exceeding RM100,000 per annum in respect of group policies.

IMPORTANT NOTE (2)

Pursuant to the Anti-Money Laundering and Anti-Terrorism Financing (Declaration of Specified Entities and Reporting Requirement) Order 2014 which is issued under Section 66B and 66D of the AMLATFA, all institutions are required to:

- Freeze without delay all property owned, undertaking owned or controlled directly or indirectly by the specified entity; and/or
- Reject or block any transaction by the specified entity.

For Office Use Only

Policy No : _____	Account Code : _____
Cover Note Code : _____	Street Code : _____
PIAM Code : _____	Construction Code : _____
Basic Rate : _____	