



Generali Insurance Malaysia Berhad
 Reg No: 197501002042 (23820-W)
 Generali Customer Service Centre
 Level 1, Menara Generali,
 27 Jalan Sultan Ismail, 50250 Kuala Lumpur, Malaysia.
 Tel: 1 300 13 2121 or +603 3007 2121 Email: customer.service.gi@general.com.my
www.general.com.my

Member of PIDM

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

Generali Insurance Malaysia Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.

INSURED PERSON DECLARATION FORM

ALL QUESTIONS MUST BE FULLY ANSWERED by You as the Proposer (or Policyholder) and verified by the Person To Be Insured if the Person To Be Insured is an adult. In this Declaration Form, where boxes are provided, please mark with a clear tick (☑). Please **do not** mark with (x). Where written information is required, please write clearly in block letters. Please attach separate sheets if space is insufficient and state clearly the question/section in this Declaration Form to which You are responding to. You must complete this Declaration Form **in adherence to requirements** stated here and in the product materials (brochure, policy contract wordings, etc.). This Declaration Form must be **completed by** You as the Proposer (or Policyholder) and the same vein of responsibility as per the requirements of the Financial Services Act 2013 for Consumer Insurance Contracts.

BNMLINK information for complaints / enquiries:

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

Tel: 1-300-88-5465 (Overseas: +603 2174 1717)

BNMLINK Webpage: bnm.gov.my/BNMLINK

PARTICULARS OF PROPOSER

Policy Number	Name of Policyholder:		
Name of Person to Be Insured (as in NRIC or Passport):		NRIC / Passport no.:	Nationality:
Relationship to Policyholder	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Parent-in-law <input type="checkbox"/> Grandparent		
Race:	<input type="checkbox"/> Malay <input type="checkbox"/> Chinese <input type="checkbox"/> Indian <input type="checkbox"/> Others _____		Weight (kg)
Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: (dd/mm/yyyy)	Height (cm)
Occupation:	Mobile:	Email:	

CHOICE OF OPTIONAL PLANS

Section 2 - Emergency Medical Evacuation & Repatriation	Overall Annual Limit	<input type="checkbox"/> Plan 1 RM500,000	<input type="checkbox"/> Plan 2 RM1,000,000	
Section 3 - Hospital Cash Benefit Insurance	Daily Cash Benefit Number of Days per Year	<input type="checkbox"/> Plan 1 RM100 60 days	<input type="checkbox"/> Plan 2 RM200 60 days	<input type="checkbox"/> Plan 3 RM300 60 days
	Daily Cash Benefit Number of Days per Year	<input type="checkbox"/> Plan 4 RM400 60 days	<input type="checkbox"/> Plan 5 RM500 60 days	
Section 4 - Outpatient Insurance	Overall Annual Limit	<input type="checkbox"/> Plan 1 RM2,000	<input type="checkbox"/> Plan 2 RM3,000	<input type="checkbox"/> Plan 3 RM5,000
Section 5 - Dental Insurance	Overall Annual Limit	<input type="checkbox"/> Plan 1 RM1,000	<input type="checkbox"/> Plan 2 RM1,500	<input type="checkbox"/> Plan 3 RM2,000
Section 6 - Critical Illnesses Insurance	Sum Insured	<input type="checkbox"/> Plan 1 RM50,000	<input type="checkbox"/> Plan 2 RM100,000	<input type="checkbox"/> Plan 3 RM150,000
	Sum Insured	<input type="checkbox"/> Plan 4 RM200,000	<input type="checkbox"/> Plan 5 RM250,000	<input type="checkbox"/> Plan 6 RM300,000
Section 7 - Personal Accident Insurance	Sum Insured	<input type="checkbox"/> Plan 1 RM50,000	<input type="checkbox"/> Plan 2 RM100,000	<input type="checkbox"/> Plan 3 RM150,000
	Sum Insured	<input type="checkbox"/> Plan 4 RM200,000	<input type="checkbox"/> Plan 5 RM250,000	<input type="checkbox"/> Plan 6 RM300,000

MEDICAL RELATED QUESTIONS FOR PERSON TO BE INSURED

Please tick (✓) Yes or No as applicable.

- | Questions: | Yes | No |
|---|--------------------------|--------------------------|
| 1. Does the Person To Be Insured smoke? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does the Person To Be Insured have any deformity or illness? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Has the Person To Be Insured ever undergone any surgical operation? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Has the Person To Be Insured ever been hospitalised for any illness or injury? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is the Person To Be Insured currently under medication or supervision of a doctor or physician for any illness or disability? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Has the Person To Be Insured ever been advised to have a surgical operation which has yet to be performed? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is the Person To Be Insured a carrier of any condition, such as hepatitis, etc.? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. If any of Question 2 to 7 is answered "Yes", please complete the details below. Please use a separate sheet of paper if necessary. | | |

Question Number	Date of occurrence or diagnosis	Description	Result of Treatment	Name of Doctor and Hospital

9. Has any of Person To Be Insured's family members (father, mother, siblings) been diagnosed with mental disorders?
 If answered "Yes", please provide the following information. Please use a separate sheet of paper if necessary.

Family Member	Types of Mental Disorder	Age Diagnosed	Treatment Received	Present State of Health

10. Has the Person To Be Insured ever had an application for or renewal of health insurance policy declined or accepted at other than normal terms?
11. Is the Person To Be Insured currently insured under any other health insurance policy?
12. If any of Question 10 to 11 is answered "Yes", please complete the details below. Please use a separate sheet of paper if necessary.

Name of Insurer and Health Insurance Product	Period of Coverage	Benefit Limit	Full Details of Claim Reported

QUESTIONS FOR PERSON TO BE INSURED FOR SECTION 6 (CRITICAL ILLNESSES INSURANCE)

If You are getting a Critical Illness (CI) Benefit (Section 6), please respond to the questions below, otherwise move on to the next part.

Questions:

Yes No

1. Has any of the Person To Be Insured's **family members** (father, mother, siblings) been diagnosed with cancer or genetic disorders?
 If answered "Yes", please provide the following information. Please use a separate sheet of paper if necessary.

Family Member	Types of Cancer or Genetic Disorder	Age Diagnosed	Treatment Received	Present State of Health

QUESTIONS FOR PERSON TO BE INSURED FOR SECTION 7 (PERSONAL ACCIDENT INSURANCE)

If You are getting a Personal Accident (PA) Insurance Benefit (Section 7), please respond to the questions below, otherwise move on to the next part.

Questions:

Yes No

1. Does the Person To Be Insured currently have other PA policies?
 If "Yes", please share copy of your policy(ies), and state the total sum insured of all current PA policies **RM** _____
2. Have any claims under any accident insurance policy been lodged in the last five (5) years?
 If "Yes", please provide the following information. Please use a separate sheet of paper if necessary.

Insurer	Claim Amount	Type of Injury	Present State of Health

DECLARATION AND AUTHORISATION

1. I/We hereby declare that the above answers and statements are true, and that I/we have withheld no information whatever regarding this application. I/We understand that it is my/our duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form and I/we hereby declare that I/we have fully and accurately answered the questions above.
 2. I/We hereby consent for Generali Insurance Malaysia Berhad and/or any company within the Generali Group of Companies and/or any of its associated companies, within or outside Malaysia, process my/our Personal Data for the purposes and to the extent stated in the Data Privacy Notice.
 3. I/We hereby confirm that I/we have read and understood the product disclosure sheet (PDS), policy wording & agreed to be bound by the terms and conditions stipulated therein. I have also taken note of the duties of the policy owner under the policy contract and where required have contacted representatives of Generali Insurance Malaysia Berhad directly for any terms that I/We do not understand prior to entering into this contract.
- I/We have read and agree with the Terms & Conditions above (Mandatory)
- I/We would like to receive special offers, promotions and information related to the insurance products, events and services of Generali Insurance Malaysia Berhad and/or any company within Generali Group of Companies and/or any of its associated companies. (optional)

Signed by the Proposer

Verified by the Person To Be Insured

 NAME:
 Date:

 NAME:
 Date:

DATA PRIVACY NOTICE

Your privacy is important to us, Generali Insurance Malaysia Berhad (“Generali Malaysia”), and we are committed to ensure that your personal data under our care is safe and secured in line with the *Personal Data Protection Act 2010 (the “Act”). The following paragraphs will provide you with a better understanding of how we collect, process, use, retain, secure, maintain accuracy and how you could access your personal data.

Collection of Personal Data

In order to process the purchase of an insurance policy and to perform policy services, it is necessary for you to provide us with obligatory personal data, such as your name, identification number, birth date, address, phone number, information on your health or medical condition, card number for payment purposes, bank account number, assessment of creditworthiness, familial and non-familial information, social media information etc. Your personal data is captured in the proposal or application form and other relevant forms as and when you transact or when you require changes or amendments to your personal details. Your personal data once provided by you would be input into our information system for processing, safe keeping and for the performance of our obligations in relation to your policy.

Processing and Use of Personal Data

We may collect and process your personal data for the following purposes:

1. for the performance of contracts between Generali Malaysia and you;
2. for the performance of our functions;
3. for the performance of our due diligence process to conduct background checks to validate and confirm the information provided by you;
4. for compliance with all applicable laws, rules, regulations, guidelines and/or other legal or regulatory requirements, as well as requirements of the government, law enforcement agencies, and any authorities to whom we are subject to, or any orders of the Court;
5. for litigating, defending or responding accordingly to an actual or potential lawsuit or queries involving regulatory and non-regulatory bodies;
6. for generally protecting our rights and property as well as ensuring the technical competence and functioning of our systems;
7. to monitor and detect any fraudulent activities in the insurance industry;
8. for marketing (including direct marketing) of insurance products;
9. to conduct market research, understand and analyse customer behaviour, location, preferences and demographics for us to offer you other products and services as well as carry out special offers and marketing programmes which may be relevant to your preferences and profile;
10. to verify your financial standing through credit reporting agency; and
11. any other purposes which are related to the aforesaid.

All personal data requested by us is obligatory unless stated otherwise. If you do not provide us with such information, we may not be able to provide you with insurance coverage or to respond to any claims.

Transfer of Personal Data

Due to the global nature of Generali Malaysia, our associates, related companies and affiliates (“Generali Group”) and business network worldwide, for the purposes set out above we may transfer personal data internationally to parties located in other countries that have a different data protection regime. The personal data may be transferred to Generali Group’s data centers, service providers, business partners, credit reporting agency, governmental or administrative authorities for us to fulfill the purposes which directly or indirectly corresponds to the purpose of collecting the personal data.

Disclosure of Personal Data

We may disclose your personal data for the abovementioned purposes to the following parties (including those within and outside Malaysia):

1. Generali Group;
2. any agents, service providers, contractors or third parties who provide any services to the companies within the Generali Group;
3. any person who has a duty of confidentiality to us; for example, external auditors, medical practitioners, trustees, insurance companies, and actuaries;
4. government agencies, statutory bodies, and other authorities;
5. our business partners and strategic alliances;
6. our assignees or potential assignees, acquirers or potential acquirers and successors-in-title; and
7. any other parties, in respect of whom you have consented to the disclosure of your personal data.

By connecting your Generali Malaysia digital platform account and your other social media account, you permit us to disclose data with the provider of your other social media account and you comprehend that the use of the data we disclose will be governed by the other service provider’s social media website’s privacy policy. If you do not wish your personal data to be disclosed with other users or with your other social media account provider, please do not link your other social media account with your Generali Malaysia digital platforms account and do not take part in social sharing on Generali Malaysia digital platform.

You may also disclose personal data on message boards, chat rooms, profile pages, and blogs, as well as other Generali Malaysia digital platform where you can upload data and contents. Kindly be informed that any information you upload or disclose via these platforms will be viewed by site visitors, users of Generali Malaysia digital platforms as well as the community. We advise you to be cautious when attempting to disclose your personal data, or any other related information when utilizing Generali Malaysia digital platform.

Access, Change and Delete Requests

We take all reasonable steps to ensure that the personal data provided by you or your authorized party is accurate, complete, not misleading and kept up-to-date consistent with the purpose for which the personal data was collected and further processed.

Under applicable laws and regulations, you may have the right to:

- access to or amend or correct your personal data that is inaccurate, incomplete, misleading, or not up to date;
- request deletion of your personal data under certain grounds;
- withdraw your consent or request a change to your scope of consent;
- make a complaint about Generali Malaysia on data handling;

Please note that some personal data may be exempt from access, correction, objection, deletion, or suppression rights in accordance with local data protection laws.

Protection of Personal Data

Implementing adequate measure to protect your personal data is Generali Malaysia’s utmost priority to ensure it is aligned with relevant data privacy and financial services laws. Nonetheless, no data transmission over the internet or data storage system can be fully secured. If you have reason to believe that your interaction with us is compromised, please notify us immediately.

Retention

We will not retain your personal data longer than is necessary for the fulfilment of the original purpose for which it was collected. We will take all reasonable steps to ensure that your personal data is destroyed or permanently deleted if no longer required unless such retention is necessary for our operational, audit, legal, regulatory, tax or accounting purposes.

New Product and Services

As part of our continuous efforts to promote awareness and greater understanding on our new products and services for your benefit, we will from time to time to contact or send you information on the said new products or services.

Queries and Complaints

If you need to contact us for any inquiries, correction, deletion or complaints, please contact our Customer Service Centre at 1 300 13 2121 or +603 3007 2121 (Monday – Friday 8:45am – 5:00pm, excluding public holidays) or email customer.service.gi@general.com.my.

*Note: The Act shall not apply to:

- Federal Government and State Governments;
- any personal data processed outside Malaysia unless that personal data is intended to be further processed in Malaysia; and
- personal data processed for electronic invoice issued or transmitted to the Director General under Finance (No. 2) Act 2023.

If there are any inconsistencies between the English and Bahasa Malaysia version of this Data Privacy Notice, the English version shall prevail. For further details, please refer to our "Data Privacy Notice" published in our website.