



Generali Insurance Malaysia Berhad (formerly known as AXA Affin General Insurance Berhad) Reg No: 197501002042 (23820-W)

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Generali Insurance Malaysia Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.
Generali Insurance Malaysia Berhad dilesenkan di bawah Akta Perkhidmatan Kewangan 2013 dan dikawal selia oleh Bank Negara Malaysia.

PERSONAL HEALTH DECLARATION FORM

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance wholly for yourself/family/dependants, you have a duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form. You must answer the questions in this Proposal Form fully and accurately.

Failure to take 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.

The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us.

In addition to answering the questions in this Proposal Form, you are 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.

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 this Proposal Form is inaccurate or has changed.

DECLARATION

Name of Policyholder/Employer:			Policy Number:		
Name of Applicant/Employee:		Plan:	NRIC/Passport :	Marital Status:	
Nationality:	Home Country:	Date of Birth:		Height :	CM
Occupation:	Nature of work:	Gender: Male / Female		Weight :	KG

PARTICULARS OF INSURED PERSONS

Name of Insured Person (as in NRIC or Passport) to be included		NRIC or Passport no.	Date of Birth	Gender	Height	Weight
Spouse			DD/MM/YYYY	M/F	CM	KG
Child1	Is this child a full time student in Malaysia? Yes/No		DD/MM/YYYY	M/F	CM	KG
Child2	Is this child a full time student in Malaysia? Yes/No		DD/MM/YYYY	M/F	CM	KG
Child3	Is this child a full time student in Malaysia? Yes/No		DD/MM/YYYY	M/F	CM	KG
Child4	Is this child a full time student in Malaysia? Yes/No		DD/MM/YYYY	M/F	CM	KG
Child5	Is this child a full time student in Malaysia? Yes/No		DD/MM/YYYY	M/F	CM	KG

QUESTIONNAIRE

Please answer the following questions:	Yes	No
1. Have you suffered from any illness, disorder, or injury during the past three (3) years which has required any form of medical or specialized examination or consultation or hospitalization or that may require future treatment?		
2. Currently receiving medical treatment and/or suffering from physical impairment, congenital abnormality or poor health?		
3. Are you currently taking any medication, or do you have any medication prescribed? (If "yes", please provide reason including name of medication, daily dosage and length of treatment?)		
4. Have you seen a doctor/specialist for medical or surgical advice, diagnostic test or investigation including test or treatment that has not been performed or completed?		
5. Do you have any other policies in force where a similar benefit may be payable?		
6. Have you ever, in respect of any medical or health insurance, had any insurer defer or decline a proposal, refuse renewal or terminated insurance?		

7. Have a family history of critical illnesses like cancer, kidney failure and others?		
8. Do you smoke any form of tobacco? (if "yes", Please advise type and daily consumption. If "no", please advise how long you have been a non-smoker.		
9. Have you ever suffered from or been treated, told by or consulted a medical practitioner for: (Please "circle")		
i. Persistent stomach, abdominal or gastric pain, hernia, ulcer or disease of the stomach, intestine, haemorrhoids/piles or rectal disorder?		
ii. Heart disorder, chest pain or discomfort or tightness, heart attack, stroke, paralysis, high blood pressure, palpitation other diseases of the heart or blood vessels or any form of circulatory disorders?		
iii. Disease of eyes, ears, nose, mouth or throat?		
iv. Arthritis, sciatica, rheumatism, gout or disorder of the muscles or joints, spinal disorder or back pain?		
v. Cancer, tumours, cysts, nodules, polyps, or growth and lumps of any kinds including malignant blood/leukaemia?		
vi. Persistent cough, asthma or shortness of breath, bronchitis, pleurisy, tuberculosis or other respiratory disorder or lung disease?		
vii. Epilepsy, fits, recurrent dizziness or headaches, fainting, sclerosis, depression, anxiety, psychiatric or psychological disorders, mental or nervous disorder, blackout or of any kind?		
viii. Enlarged lymph nodes, skin lesions, HIV or AIDS related conditions or other sexually transmitted disease?		
ix. Anaemia, blood disorder, varicose veins or deep vein thrombosis, thyroid conditions, disorder (such as goiter), rheumatic fever ?		
x. Disease of the breast, the reproduction system, menstrual, abnormal pap smear(s) or complication at child-birth?		
xi. High cholesterol, hypercholesterolemia, hyperlipidemia, hyperuricemia, hyperglycemia or abnormal lipid profile?		
xii. Diabetes mellitus, liver disorder or hepatitis of any kind or jaundice, stones in the urinary and biliary systems and cholecystitis? Stones (Calculi) or any disorder of the genito-urinary system (Sex organs and urinary system including kidneys, ureters, bladder, prostate, etc)		
10. For Children below two (2) years old:		
i. Was this Child born premature or pre-term?		
ii. What was the birth weight?		
iii. Duration of hospital stay after birth?		
iv. Currently, any residual complications or impairment?		

If you have answered "YES" to the above questions 1 to 10, please give details below and number your answers to correspond with the number of the questions.

<u>Question</u>	<u>Name of Insured Persons</u>	<u>Nature of Illness</u>	<u>Date Treated</u>	<u>Present State of Health</u>	<u>Name of Hospital and Doctor</u>
<u>For Question 3</u>	<u>Name of medication</u>	<u>Reason</u>		<u>Daily dosage</u>	<u>Length of treatment</u>

DECLARATION

- 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.
 - 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.
 - 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)

_____ Signature of Applicant	_____ Date
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Note: The liability of the company does not commence until the application has been accepted.

DATA PRIVACY NOTICE

Generali Insurance Malaysia Berhad ("We", "Us", "Our") is committed and have put in place a Data Privacy Notice to safeguard the security and confidentiality of your personal information with us. In using our services and website, you acknowledge and agree to be bound by the terms of our Data Privacy Notice. The Data Privacy Notice is available at the end of this proposal form and at general.com.my.

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. The following paragraphs will provide you with a better understanding of how we collect, process, use, retain, secure, endeavour to 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, financial, familial and non- familial information, social media information etc. Your personal data is captured in the 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; and
10. 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 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 Malaysia data centers, our associates, related companies and affiliates ("Generali Group"), service providers, business partners, 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. our associated and related companies and affiliates ("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 platforms 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 platforms.

You may also disclose personal data on message boards, chat rooms, profile pages, and blogs, as well as other Generali Malaysia digital platforms 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 platforms.

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.

Who to Contact About Your Personal Data

If you need to contact us for any inquiries, correction, deletion, or complaints please write to us at:

GENERALI INSURANCE MALAYSIA BERHAD
Manager, Customer Service Department
8th Floor, Menara Multi-Purpose, Capital Square,
8 Jalan Munshi Abdullah, 50100 Kuala Lumpur
Tel.: +603 2034 9888
Email: info@general.com.my

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.