

Money Takaful Proposal Forms

Important Notice

- Pursuant to Section 28, Takaful Act 1984, you are to disclose in this Proposal Form, fully and faithfully all the facts, which you know or ought to know, otherwise the Certificate issued may be void.
- If there is insufficient space to complete an answer, please attach a signed and dated addendum. Any documents attached shall form part of this proposal form.

Company Proposer

Company Name

Company Registration No.

Date of Company Registration

Contact Person

Nature of Business

Phone No (Office/Mobile)

Fax No.

E-mail

Correspondence Address

Postcode

Town

State

Details of Coverage Required

1. Period of Takaful from to

2. Location of premises to be covered. If more than one, state all.

Postcode

Town

State

3. Nature of Business (please provide if different against same question under Company Proposer)

4. Territorial limit

5. Details to be covered

The situation/ circumstances	Limit of liability for any single loss	Total carrying during period of takaful
A. Premise Risks		
i. Money (other than wages and/or salaries) whilst secured in the locked safe or strong-room in the proposer's premises	RM	RM
ii. Wages and/or salaries whilst secured in the locked safe or strong-room in the premises	RM	RM
iii. Money (other than wages and/or salaries) whilst secured in locked drawers/cabinets/cash registers in the proposer's premises	RM	RM
B. Transit Risks		
i. Wages and/or salaries whilst in direct transit between proposer's premises and bank or post office and whilst in the premises until paid out on the day of withdrawal during business hours.	RM	RM
ii. Money (other than wages and/or salaries) whilst in direct transit between proposer's premises and the bank	RM	RM
iii. Money (other than as described in Bi and Bii above) in the personal custody of proposer's authorised employees whilst in transit from the time of receipt until delivered at the premises or bank provided that all money be delivered on the same day as received	RM	RM

6. State which premises are occupied at night and by whom.



BAAZZ

7. Is money retained overnight? If yes, please provide following details. Yes No
- a. Situation of premises _____
- b. Is the Money kept in a locked safe or strong room? If yes, please provide the following information Yes No
- i. Name of Maker _____ ii. Weight of safe _____
- iii. Type of safe Free Standing Bolted to Floor Mounted to Wall
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8. a. How often are money carryings made? _____
- b. Will all carryings be made during office hours? Yes No
- c. On what day of the week is the money drawn from and/or paid into bank? _____
- d. How will the money be carried?
- i. If by employee, state the following:
- * Number of employees engaged in carrying money _____
 - * Mode of Transport e.g. on foot or by private or public conveyance _____
 - * Details of any special safety precaution taken _____
- ii. If by professional cash carrier, state the name of the cash carrier _____
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9. Is this proposed cover previously or presently covered/insured elsewhere? If yes, provide details Yes No
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10. Have you made any claim for loss, destruction of, or damage to Money for the last 3 years? If yes, provide details Yes No
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11. Has any takaful operator/insurance company in respect of any of the perils to which this proposal relates
- a. Declined to cover/insure you? Yes No
- b. Required special terms to cover/insure you? Yes No
- c. Cancelled or refused to renew your takaful/insurance? Yes No
- If 'Yes' for any of item above, please give details _____

Declaration

I/We agree to participate in this general takaful scheme based on the principle of takaful and to pay the contribution on the basis of tabarru' (donation) for the purpose of helping each other participants who have suffered tragedy and with this contribution, I/We are entitled to the takaful cover as expressed in the terms and conditions of this takaful contract.

I/We further agree that my contribution be credited into the General Takaful fund (Fund) and to elect Etiqa Takaful Berhad (ETB) to invest and manage the Fund according to the principles of the shariah. I/We also permit ETB to make payment of claims/takaful benefits, provisions and reserves based on the guidelines and policies laid down by the authorities and ETB to be paid a wakalah fee based on the rate of 40%.

If at the end of each financial year, there is a surplus of income over liabilities in the Fund, I/We agree that ETB receive 50% of it as incentive while the balance 50% will be reserved for distribution amongst participants subject to the terms of this contract and fixed by the authorities. I/We further agree that if the surplus is less than RM10.00 (Ringgit Malaysia Ten) then the surplus is to be credited into a Charity Fund, which will be utilized as 'amal jariah' on behalf of the participants.

I/We understand that this Takaful will not be enforced until and unless this proposal has been accepted by Etiqa Takaful Berhad.

Signature of Proposer / Company Stamp _____

Date _____

Verification Of Proposer's Identity

In Compliance With Section 16/2 Of The Anti-Money Laundering Act 2001

I/We hereby certify that the Proposer's original MyKad/Business Registration Certification was verified and authenticated by me/us at the Point of Sales.

Third Party Verification* _____

Name of Officer/Intermediary _____

Signature _____

MyKad No / Business Registration Certification _____

Date _____

* "Third Party" means by Takaful Agents, Takaful Brokers or staff of Takaful Operator.

Note:

To retain a copy of MyKad for Applicant(s)/Proposer(s) for Individual Certificate Takaful where the contribution is exceeding RM50,000.00 per annum and a copy of Business Registration Certificate for Group Certificate Takaful is exceeding RM100,000.00 per annum.

For Office Use

Source : HQ / Branch Sales Channel _____

Sales Channel Code : _____

Channel : _____

Sales Channel Name : _____